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Fill in this information to identify your ca		
United States Bankruptcy Court for the: WESTERN DISTRICT OF VIRGINIA		
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on your Nicholas **Brandie** government-issued picture First Name First Name identification (for example, Charles Marie your driver's license or Middle Name Middle Name passport). Grady Grady Bring your picture Last Name Last Name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) All other names you Kathleen **Brandie** have used in the last 8 First Name First Name years Marie Marie Middle Name Middle Name Include your married or Grady McQuinn maiden names. Last Name Last Name **Brandie** First Name First Name Marie Middle Name Middle Name LaPlante Last Name Last Name Only the last 4 digits of xxx - xx - <u>3</u> <u>8</u> <u>7</u> <u>9</u> $xxx - xx - 6 \quad 4 \quad 3 \quad 6$ your Social Security number or federal OR OR **Individual Taxpayer** 9xx - xx - ____ ___ ___ Identification number 9xx - xx -

(ITIN)

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	otor 1 Nicholas Charles (otor 2 Brandie Marie Gra	-	ase number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	✓ I have not used any business names or EINs.	✓ I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last 8 years	Business name	Business name
	Include trade names and	Business name	Business name
	doing business as names	Business name	Business name
		EIN	EIN
		EIN	EIN — — — — — — — —
5.	Where you live		If Debtor 2 lives at a different address:
		128 Falling Rock Drive	
		Number Street	Number Street
		Stuarts Draft VA 24477	
		City State ZIP Code	City State ZIP Code
		Augusta	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)
P	art 2: Tell the Court A	bout Your Bankruptcy Case	
7.	The chapter of the Bankruptcy Code you	Check one: (For a brief description of each, see Noti for Bankruptcy (Form 2010)). Also, go to the top of p	ice Required by 11 U.S.C. § 342(b) for Individuals Filing page 1 and check the appropriate box.
	are choosing to file under	☑ Chapter 7	
		Chapter 11	
		Chapter 12	
		☐ Chapter 13	

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	tor 2 Nicholas Charles (Brandie Marie Gra				Cas	se num	ber (if known)		
8.	How you will pay the fee	V	court for pay with	pay the entire fee where for more details about h ith cash, cashier's check f, your attorney may pay	low you may pay. T k, or money order.	ypicall If your	y, if you are pay attorney is subi	ring the fee yourse mitting your paym	elf, you may
				d to pay the fee in insta duals to Pay The Filing I	•			and attach the Ap	plication for
			By law than 1 fee in i	nest that my fee be wait, a judge may, but is not 50% of the official pove installments). If you ch Fee Waived (Official Fo	ot required to, waive erty line that applies loose this option, yo	your f to you u mus	ee, and may do ir family size an t fill out the App	so only if your ind d you are unable	come is less to pay the
9.	Have you filed for bankruptcy within the last 8 years?		No						
			Yes.						
		Dist	ict			When		Case number _	
		Dist	ict					Case number _	
		Dist	ict		,			Case number _	
10.	Are any bankruptcy		No						
	cases pending or being filed by a spouse who is		Yes.						
	not filing this case with you, or by a business	Deb	or				Relationsh	nip to you	
	partner, or by an affiliate?	Dist	ict			When	MM / DD / YYYY	Case number, _ if known	
		Deb	or				Relationsh	nip to you	
		Dist	ict			When	MM / DD / YYYY	Case number, _ if known	
11.	Do you rent your residence?			Go to line 12. Has your landlord obta	ined an eviction jud	lgment	against you?		
				_	al Statement About a of this bankruptcy p			Against You (Forr	m 101A)

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	tor 2 Nicholas Charles G tor 2 Brandie Marie Grad	-			Case number (i	f known)		
Pa	Report About Ar	ıy Bı	usine	sses You Own as a	Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a			Go to Part 4. Name and location of bus Name of business, if any	siness			
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Number Street				
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Health Care Busine Single Asset Real I Stockbroker (as de	ess (as defined in 11 U.S.C. § Estate (as defined in 11 U.S.C fined in 11 U.S.C. § 101(53A) (as defined in 11 U.S.C. § 10	s. § 101(51B)))	ZIP Cod	de
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>	can	set ap st rece	opropriate deadlines. If you	ne court must know whether you indicate that you are a small nt of operations, cash-flow statestist, follow the procedure in	I business de atement, and f	btor, you federal ind	must attach your come tax return
	debtor?	$\overline{\mathbf{V}}$	No.	I am not filing under Cha	apter 11.			
	For a definition of small business debtor, see		No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition the Bankruptcy Code.				g to the definition in
	11 U.S.C. § 101(51D).		Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Pa	Report If You Ov	vn o	r Hav	e Any Hazardous Pr	operty or Any Property	/ That Nee	ds Imm	ediate Attentior
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable		No Yes.	What is the hazard?				
	hazard to public health or safety? Or do you own any property that needs immediate attention?	do you own y that needs If immediate attention is needed						
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property?	Number Street			
				-	City		State	ZIP Code

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	otor 1 Nicholas C Brandie M	Charles Grady arie Grady		Case number (if known)		
P	art 5: Explain	Your Efforts to Re	eceive a Briefing About Credi	t Counseling		
	Tell the court whether you have received a briefing about credit counseling.	counseling age	fing from an approved credit ncy within the 180 days before I uptcy petition, and I received a	You must chec I received counseling filed this b	2 (Spouse Only in a Joint Case): ck one: a briefing from an approved credit g agency within the 180 days before I ankruptcy petition, and I received a of completion.	
	The law requires that you receive a briefing about credit counseling before you file for	plan, if any, that	the certificate and the payment you developed with the agency. Ifing from an approved credit ncy within the 180 days before I uptcy petition, but I do not have	plan, if any I received counseling filed this b	ppy of the certificate and the payment, that you developed with the agency. a briefing from an approved credit gagency within the 180 days before I ankruptcy petition, but I do not have	
	bankruptcy. You must truthfully check one of the following choices.	Within 14 days a	fter you file this bankruptcy petition, copy of the certificate and payment	• • • • • • • • • • • • • • • • • • • •		
	If you cannot do so, you are not eligible to file. If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.	services from a unable to obtain days after I mad	sked for credit counseling n approved agency, but was n those services during the 7 le my request, and exigent merit a 30-day temporary quirement.	services fr unable to d days after circumstar	at I asked for credit counseling om an approved agency, but was obtain those services during the 7 I made my request, and exigent nces merit a 30-day temporary he requirement.	
		requirement, atta efforts you made were unable to o	lay temporary waiver of the ach a separate sheet explaining what to obtain the briefing, why you btain it before you filed for what exigent circumstances le this case.	To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.		
		dissatisfied with	e dismissed if the court is your reasons for not receiving a ou filed for bankruptcy.	Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.		
		still receive a brid You must file a c along with a copy	isfied with your reasons, you must efing within 30 days after you file. ertificate from the approved agency, of the payment plan you r. If you do not do so, your case d.			
		•	Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.		ion of the 30-day deadline is granted only nd is limited to a maximum of 15 days.	
		☐ I am not require credit counselir	d to receive a briefing about ng because of:		quired to receive a briefing about nseling because of:	
		☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	☐ Incapa	deficiency that makes me incapable of realizing or making rational decisions about finances.	
		☐ Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	☐ Disabi	lity. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	
		Active duty.	I am currently on active military duty in a military combat zone.	☐ Active	duty. I am currently on active military duty in a military combat zone.	
		briefing about cre	u are not required to receive a edit counseling, you must file a r of credit counseling with the court.	briefing abo	ve you are not required to receive a out credit counseling, you must file a waiver of credit counseling with the court.	

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	tor 2 Nicholas Charles 0 Brandie Marie Gra	•			Case nu	ımber (if knov	wn)	
Pa	art 6: Answer These	Questions	for Reporting Pu	rpos	ses			
16.	What kind of debts do you have?		"incurred by an individence No. Go to line 16b.				are defined in 11 U.S.C. § 101(8) ousehold purpose."	
			money for a business or investment or through the operation of the business or investment. No. Go to line 16c.					
		16c. Sta	ate the type of debts yo	u ow	e that are not consum	ner or busine	ss debts.	
17.	Are you filing under Chapter 7?	No.	I am not filing under	Char	oter 7. Go to line 18.			
	Do you estimate that after any exempt property is	∀ Yes.	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?					
	excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?		✓ No Yes					
18.	How many creditors do you estimate that you owe?	☐ 1-49 ☑ 50-9 ☐ 100- ☐ 200-	9 199		1,000-5,000 5,001-10,000 10,001-25,000		M (I 400.000	
19.	How much do you estimate your assets to be worth?	\$50, \$100	550,000 001-\$100,000 0,001-\$500,000 0,001-\$1 million		\$1,000,001-\$10 mill \$10,000,001-\$50 mi \$50,000,001-\$100 n \$100,000,001-\$500	illion [\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion	
20.	How much do you estimate your liabilities to be?	\$50,	550,000 001-\$100,000 0,001-\$500,000 0,001-\$1 million		\$1,000,001-\$10 mill \$10,000,001-\$50 mi \$50,000,001-\$100 m \$100,000,001-\$500	illion	\$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion	
Pa	art 7: Sign Below							
For	you	I have ex and corre	•	nd I d	eclare under penalty	of perjury tha	at the information provided is true	
		or 13 of ti		•			, if eligible, under Chapter 7, 11, 12, inder each chapter, and I choose to	
			rney represents me and s document, I have obt			•	who is not an attorney to help me 1 U.S.C. § 342(b).	
		I request	relief in accordance wit	th the	e chapter of title 11, U	nited States	Code, specified in this petition.	
		connection	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
		X /s/ Ni	cholas Charles Gra	dy	X	/ /s/ Brand	ie Marie Grady	
		Nicho	las Charles Grady, Deb	otor 1		Brandie Ma	arie Grady, Debtor 2	
		Execu	ated on 07/19/2019 MM / DD / YYY	<u>Y</u>		Executed of	on 07/19/2019 MM / DD / YYYY	

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Debtor 1 Debtor 2	Nicholas Charles Brandie Marie Gra	•	Case number (if known)				
For your a represente	ttorney, if you are ed by one	I, the attorney for the debtor(s) name eligibility to proceed under Chapter relief available under each chapter f	7, 11, 12, or 13 of title 11, United	States Code, and have explained the			
If you are not represented by an attorney, you do not need to file this page.		the debtor(s) the notice required by certify that I have no knowledge after is incorrect.	• • • • • • • • • • • • • • • • • • • •	e in which § 707(b)(4)(D) applies, n the schedules filed with the petition			
		X /s/ Heidi Shafer for Cox Law Signature of Attorney for Debtor	/ Group, PLLC D	ate 07/19/2019 MM / DD / YYYY			
		Heidi Shafer for Cox Law G	roup, PLLC				
		Printed name Cox Law Group, PLLC					
		Firm Name					
		900 Lakeside Drive					
		Number Street					
		Lynchburg	VA	24501-3602			
		City	State	ZIP Code			
		Contact phone (434) 845-260	Email address hei	idi@coxlawgroup.com			
		48765					
		Bar number	State				

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Fill in this info	ormation to i	dentify your	case and this fil	ing:		
Debtor 1	Nicholas	Charles	Grady			
Debior 1	First Name	Middle Nam				
Debtor 2	Brandie	Marie	Grady			
(Spouse, if filing)		Middle Nam		-		
United States Ban	kruptov Court fo	r that WESTER	N DISTRICT OF V	(IDGINIA		
United States Ban	Krupicy Court to	wester	N DISTRICT OF V	IKGINIA		
Case number (if known)					☐ Check	if this is an
(II KIIOWII)					ameno	ded filing
Official Form	106A/R					
Schedule A/		У				12/15
					et fits in more than one ca	
filing together, bot sheet to this form.	h are equally re On the top of a	esponsible for s any additional p	upplying correct inf ages, write your na	formation. If more me and case numb	oossible. If two married pe space is needed, attach a eer (if known). Answer eve tate You Own or Have	separate ery question.
1. Do you own o	r have any lega	ıl or equitable ir	nterest in any reside	nce. building, land	, or similar property?	
No. Go to			, , , , , , , , , , , , , , , , , , , ,	3,	, ,	
<u> </u>	ere is the proper	ty?				
_			for all of your optrio	s from Part 1 inclu	iding any	
			for all of your entrie 1. Write that number			\$0.00
Part 2: Des	cribe Your \	/ehicles				
-		-	-	•	registered or not? Include	•
you own that somed	one else arives.	ii you lease a ve	enicie, also report it o	n Scriedule G. Exec	cutory Contracts and Unexpi	red Leases.
3. Cars, vans, tr	ucks, tractors,	sport utility veh	icles, motorcycles			
□ No						
✓ Yes						
3.1.		Wh	o has an interest in	the property?	Do not deduct secured cla	ims or exemptions. Put the
Make:	Honda		o has an interest in eck one.	the property:	amount of any secured cla	•
Model:	Accord		Debtor 1 only		Creditors Who Have Claim	s Secured by Property.
Year:	2004	<u> </u>	Debtor 2 only		Current value of the	Current value of the
	-	─	Debtor 1 and Debtor	•	entire property?	portion you own?
Approximate mileag	e. <u>300,000</u>	—	At least one of the d	ebtors and another	\$4,025.00	\$4,025.00
Other information:	a.u.al	_	Chack if this is san	amunitu nranartu		
2004 Honda Acc	ora	Ц	Check if this is con (see instructions)	minumity property		
NADA Clean Ret	ail Value \$402	5.00	,			
3.2.		Wh	o has an interest in	the property?	Do not deduct secured cla	ims or exemptions. Put the
Make:	Dodge	Che	eck one.		amount of any secured cla	
Model:	Caravan		Debtor 1 only		Creditors Who Have Claim	
Year:	2005		Debtor 2 only	. O b.	Current value of the	Current value of the
Approximate mileag	e: 256,364	<u> </u>	Debtor 1 and Debtor At least one of the d	•	entire property?	portion you own?
Other information:	, ,	— ⊔	AL IEAST OTHE OF THE O	EDIOIS AND ANDINE!	\$1,200.00	\$1,200.00
2005 Dodge Cara	avan (approx.	256,364 □	Check if this is con	nmunity property		
miles)	(-1-1-1	, · · · ·	(see instructions)	, , , ,		

Schedule A/B: Property

page 1

Client Estimated Value \$1200.00

Official Form 106A/B

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Debto Debto			s Charles Gra Marie Grady	dy	Case number (if known)				
Make: Jeep Check one. Model: Grand Cherokee Debtor 1 or Debtor 2 or Debtor 1 a Approximate mileage: 225,000 At least on Other information: 2003 Jeep Grand Cherokee (approx. Check if the Check of th			Grand Chero 2003 225,000	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and	amount of a Creditors W Current val entire propo	ny secured clai ho Have Claim ue of the	ims or exemptions. Put the ims on Schedule D: is Secured by Property. Current value of the portion you own? \$900.00		
4. \	Watercr	raft, aircra es: Boats		s, ATVs and other recreational vehicles, of personal watercraft, fishing vessels, snowment					
•	entries		•	on you own for all of your entries from Par hed for Part 2. Write that number here		→	\$6,125.00		
Do yo		or have a		sonal and Household Items itable interest in any of the following items	?		Current value of the portion you own? Do not deduct secured claims or exemptions.		
 	□ No	. Describ		iture, linens, china, kitchenware inuation page(s).			\$1,130.00		
	Example No	es: Telev	collections; elec	s; audio, video, stereo, and digital equipment; stronic devices including cell phones, camera Stereo, 2 Computer, 1 Tablet, 1 Record	s, media players, gam	nes	\$450.00		
<i>I</i>	Example No		ues and figurines o, coin, or baseba	; paintings, prints, or other artwork; books, pid all card collections; other collections, memora		ects;]		
1	Example	es: Sports		es exercise, and other hobby equipment; bicycle arpentry tools; musical instruments	s, pool tables, golf clu	ıbs, skis;	_		
	□ No ☑ Yes	. Describ	l l	olf Clubs, 4 Hand Weights, 2 Push Mov video Game, 2 Game Systems, 3 Bicy		rs, 10 Power	\$600.00		
I	√ No			s, ammunition, and related equipment]		

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		licholas Ch Brandie Mar		Case number (if known)	
11.		s: Everyday c	clothes, furs,	eather coats, designer wear, shoes, accessories	
	☐ No ✓ Yes.	Describe	Men's Clo	thing and Women's Clothing	\$500.00
12.	Jewelry Examples	s: Everyday je gold, silver	•	me jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	_
	□ No ✓ Yes.	Describe	See contir	nuation page(s).	\$155.00
13.	•	animals : Dogs, cats,	, birds, horse	s	-
	□ No ✓ Yes.	Describe	2 Dog		\$20.00
14.	Any othe did not lis	-	nd househol	d items you did not already list, including any health aids you	_
		Give specific		sses, 1 Nebulizer	\$320.00
15.				entries from Part 3, including any entries for pages you have	\$3,175.00
P				ncial Assets	
				able interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples	s: Money you petition	have in your	wallet, in your home, in a safe deposit box, and on hand when you file your	
	□ No ✓ Yes			Cash:	\$25.00
17.	Deposits <i>Examples</i>	: Checking,	houses, and	ther financial accounts; certificates of deposit; shares in credit unions, other similar institutions. If you have multiple accounts with the same	
	□ No ☑ Yes			Institution name:	
	17.1	. Checking	account:	Dupont Checking account	\$170.00
	17.2	. Savings a		Dupont Savings account	\$1.00
			account:		
	17.3	. Savings a		TCF Savings account	\$5.00
18.	Bonds, m	nutual funds,	account:	TCF Savings account traded stocks accounts with brokerage firms, money market accounts	\$5.00

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	tor 1 tor 2	Nicholas Charle Brandie Marie G			Case number (if known)	
19.	-	oublicly traded stock erest in an LLC, par		ncorporated and unincorporat	ed businesses, including	
	inf	os. Give specific formation about em	Name of entity:		% of ownership:	
20.	Negoti	<i>iable instrument</i> s incl	lude personal checl	r negotiable and non-negotiab ks, cashiers' checks, promissory anot transfer to someone by sign	notes, and money orders.	
	inf	o es. Give specific formation about em	Issuer name:			
21.		ement or pension ac ples: Interests in IRA profit-sharing pl	, ERISA, Keogh, 40	01(k), 403(b), thrift savings acco	unts, or other pension or	
	-	es. List each	Type of account:	Institution name:		
		•	401(k) or similar pla	an: 401(k) ERISA		\$8,358.13
22.	Your s Examp		eposits you have m	ade so that you may continue so d rent, public utilities (electric, go		
	✓ No	o es		Institution name or individual:		
23.	☑ No	0			for life or for a number of years)	
	_	98				
24.	26 U.S	S.C. §§ 530(b)(1), 529			or under a qualified state tuition pro	ogram.
	☑ No		Institution name a	and description. Separately file t	he records of any interests. 11 U.S.C.	§ 521(c)
25.		s, equitable or future rs exercisable for yo		erty (other than anything lister	d in line 1), and rights or	
		o es. Give specific formation about them	1			
26.			•	rets, and other intellectual proproceeds from royalties and lice	• • •	
	_	o es. Give specific formation about them	1			
27.	Examp	٥.	-	•	ngs, liquor licenses, professional licen	ses
		o es. Give specific formation about them				

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	tor 1 tor 2	Nicholas Charles Grady Brandie Marie Grady	1		Coop number (if known)		
DOD	101 2	Brandle Marie Grady			Case number (if known)		
Money or pr		roperty owed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
28.		funds owed to you					
	☑ No	s. Give specific information				Federal	
	abo	out them, including whether					:
	•	u already filed the returns d the tax years				State: Local:	
29.	-	support les: Past due or lump sum al	imony, spousal support,	child support, main	tenance, divorce settlement		settlement
	✓ No	s. Give specific information			Alimony:		
		·			Maintenar	ice:	
					Support:		
					Divorce se	ettlement	
					Property s	ettlemen	:
31.	Interes Example No Yes cor	sts in insurance policies les: Health, disability, or life s. Name the insurance mpany of each policy d list its value	empany name:		edit, homeowner's, or rente Beneficiary:		nce rrender or refund value:
		<u>Te</u>	erm Life Insurance No	Cash Value			\$1.00
32.	If you a entitled No	terest in property that is duare the beneficiary of a living to receive property because s. Give specific information	trust, expect proceeds fro		policy, or are currently		
33.	Examp	against third parties, whet les: Accidents, employment	•		e a demand for payment		
	✓ No ☐ Yes	s. Describe each claim					
34.	rights t	contingent and unliquidated to set off claims	I claims of every nature	, including counte	rclaims of the debtor and		
	✓ No ☐ Yes	s. Describe each claim					
35.	Any fin	nancial assets you did not a	Iready list				
	□ No ✓ Yes	s. Give specific information	See continuation pa	ge(s).			\$2,555.00

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	tor 1 tor 2	Nicholas Charles Grady Brandie Marie Grady Case number (if known)	
36.		e dollar value of all of your entries from Part 4, including any entries for pages you have ed for Part 4. Write that number here	\$11,115.13
Pa	art 5:	Describe Any Business-Related Property You Own or Have an Interest In. List any	real estate in Part 1.
37.	Do you	own or have any legal or equitable interest in any business-related property?	
	لــنــا	Go to Part 6. s. Go to line 38.	
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accou	nts receivable or commissions you already earned	
	✓ No ☐ Yes	s. Describe	
39.		equipment, furnishings, and supplies es: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	1
	✓ No ☐ Yes	s. Describe	
40.	Machin	ery, fixtures, equipment, supplies you use in business, and tools of your trade	-
	✓ No ☐ Yes	s. Describe	
41.	Invento	ory	I
	☑ No	Describe .	1
	☐ res	s. Describe	
42.		ts in partnerships or joint ventures	
	✓ No ☐ Yes	s. Describe Name of entity: % of ownership:	
43.	Custon	ner lists, mailing lists, or other compilations	
	✓ No ☐ Yes	s. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	1
		Yes. Describe	
44.	Any bu	siness-related property you did not already list	
	✓ No ☐ Yes	s. Give specific information.	
45.		e dollar value of all of your entries from Part 5, including any entries for pages you have d for Part 5. Write that number here	\$0.00
P		Describe Any Farm- and Commercial Fishing-Related Property You Own or Have all you own or have an interest in farmland, list it in Part 1.	n Interest In.
46.	Do you	own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
		Go to Part 7. s. Go to line 47.	

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	otor 1	Nicholas Charles Grady		
Deb	otor 2	Brandie Marie Grady	Case number (if known)	
				Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a	nimals		dame of exemptions.
	•	les: Livestock, poultry, farm-raised fish		
	✓ No ☐ Yes			
48.	Crops-	-either growing or harvested		
	✓ No			
		s. Give specific prmation		
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, a	and tools of trade	
	☑ No			_
	Yes			
50	Farm a	nd fishing supplies, chemicals, and feed		
50.				
	✓ No			
	_			
51.	Any fa	rm- and commercial fishing-related property you did not	already list	
	✓ No	s. Give specific		\neg
		ormation		
52.		e dollar value of all of your entries from Part 6, including		\$0.00
	attache	ed for Part 6. Write that number here)	Ψ0.00
Pa	art 7:	Describe All Property You Own or Have an Int	erest in That You Did Not List Abov	<u>e</u>
53.	Do νου	have other property of any kind you did not already list?	9	
	-	les: Season tickets, country club membership		
	☑ No			
	Yes	s. Give specific information.		
54.	Add the	e dollar value of all of your entries from Part 7. Write tha	t number here	\$0.00

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Debtor 1 **Nicholas Charles Grady** Debtor 2 **Brandie Marie Grady** Case number (if known) Part 8: List the Totals of Each Part of this Form \$0.00 56. Part 2: Total vehicles, line 5 \$6,125.00 57. Part 3: Total personal and household items, line 15 \$3,175.00 58. Part 4: Total financial assets, line 36 \$11,115.13 59. Part 5: Total business-related property, line 45 \$0.00 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 \$0.00 Copy personal \$20,415.13 62. Total personal property. Add lines 56 through 61..... \$20,415.13 property total \$20,415.13 63. Total of all property on Schedule A/B. Add line 55 + line 62.....

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Debtor 1 **Nicholas Charles Grady** Debtor 2 **Brandie Marie Grady** Case number (if known) Household goods and furnishings (details): 1 Sofa/Couch, 1 Love Seat, 1 Dining Table, 6 Dining Chairs, 1 Microwave, 1 Washer, 1 Dryer, 1 \$880.00 Recliner Chair, 3 Rocking Chairs, 1 Entertainment Center, 1 Desk, 3 Other Tables, 2 Nightstands, 3 Dressers, 3 beds, 5 Lamps, 1 Silverwear Set, 8 Lawn Furniture **Queen Size Mattress** \$250.00 12. Jewelry (details): 2 Watches, 5 Earings, 5 Necklaces, 1 Other Ring \$55.00 2 Wedding Bands \$100.00 35. Any financial assets you did not already list (details): Potential funds due to debtor, unknown at this time, including State and Federal Tax refunds, \$2,355.00 6/12 interest in 2019 tax refund of approximately \$4711(EIC=\$3316) = \$2355.50(EIC=\$1658), possible garnishment funds, insurance proceeds, proceeds related to claims or causes of action that may be asserted by the debtor, any claim for earned but unpaid wages, and/or inheritance. **Garnishment Funds** \$200.00

Fill in this inf	formation to i	dontify your	00001			
Debtor 1	Nicholas	Charles	Grady			
Debtor 2	First Name Brandie	Middle Nam Marie	e Last Name Grady			
(Spouse, if filing)		Middle Nam				
United States Ba	inkruptcy Court fo	r the: WESTER	N DISTRICT OF VI	RGII	NIA	☐ Check if this is an
Case number (if known)						amended filing
Official Form	106C					
Schedule C	: The Prope	erty You C	aim as Exemp	ot		04/19
Using the property	you listed on Schill out and attach t	nedule A/B: Prop to this page as n	perty (Official Form 106	6A/B)	as your source, list the	esponsible for supplying correct information. e property that you claim as exempt. If more ssary. On the top of any additional pages,
is to state a speci exempted up to the receive certain be exemption of 100°	ific dollar amoun he amount of any enefits, and tax-e % of fair market	t as exempt. Al applicable star xempt retireme value under a la	Iternatively, you may tutory limit. Some ex nt fundsmay be unl aw that limits the exe	clair cemp imite mpti	m the full fair market v tionssuch as those ed in dollar amount. H	ou claim. One way of doing so value of the property being for health aids, rights to lowever, if you claim an ar amount and the value of the e statutory amount.
Part 1: Ide	entify the Prop	perty You Cla	aim as Exempt			
I. Which set of	exemptions are	you claiming?	Check one only,	even	if your spouse is filing	with you.
ست	-		nkruptcy exemptions. U.S.C. § 522(b)(2)	11 U.	.S.C. § 522(b)(3)	
2. For any prop	erty you list on \$	Schedule A/B th	nat you claim as exen	npt, f	fill in the information I	pelow.
Brief description of Schedule A/B that			Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B		eck only one box for h exemption	
Brief description:	cord (approx. 3	00,000	\$4,025.00		\$1.00 100% of fair market value, up to any	Va. Code Ann. § 34-4
2004 Honda Acc miles) 2004 Honda Acc	cord				applicable statutory limit	

☐ Yes

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Debtor 1 Debtor 2	Nicholas Charles Grady Brandie Marie Grady		Case number (if known)					
Part 2:	Additional Page							
	ription of the property and line on A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B		ck only one box for h exemption				
miles)	iption: da Accord (approx. 300,000 da Accord	\$4,025.00		\$1.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(8)			
(2nd exer	ean Retail Value \$4025.00 mption claimed for this asset) Schedule A/B:3.1							
Brief descr 2005 Dod miles)	iption: Ige Caravan (approx. 256,364	\$1,200.00		\$1.00 100% of fair market value, up to any applicable statutory	Va. Code Ann. § 34-4			
(1st exem	timated Value \$1200.00 nption claimed for this asset) Schedule A/B: 3.2			limit				
Brief description: 2005 Dodge Caravan (approx. 256,364 miles)		\$1,200.00		\$1,200.00 100% of fair market value, up to any applicable statutory	Va. Code Ann. § 34-26(8)			
(2nd exer	timated Value \$1200.00 mption claimed for this asset) Schedule A/B: 3.2			limit				
Brief descr 2003 Jeel 225,000 m	p Grand Cherokee (approx.	\$900.00		\$1.00 100% of fair market value, up to any applicable statutory	Va. Code Ann. § 34-4			
Client Estimated Value \$900.00 (1st exemption claimed for this asset) Line from Schedule A/B:3.3				limit				
Brief descr 2003 Jeej 225,000 n	p Grand Cherokee (approx.	\$900.00		\$900.00 100% of fair market value, up to any applicable statutory	Va. Code Ann. § 34-26(8)			
(2nd exer	timated Value \$900.00 mption claimed for this asset) Schedule A/B: 3.3			limit				
6 Dining 0 Dryer, 1 F Entertain Tables, 2 5 Lamps, Furniture	Duch, 1 Love Seat, 1 Dining Table, Chairs, 1 Microwave, 1 Washer, 1 Recliner Chair, 3 Rocking Chairs, 1 ment Center, 1 Desk, 3 Other Nightstands, 3 Dressers, 3 beds, 1 Silverwear Set, 8 Lawn	\$880.00		\$880.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4a)			

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Nicholas Charles Grady Debtor 2 **Brandie Marie Grady** Case number (if known) Part 2: **Additional Page** Current value of Brief description of the property and line on Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$250.00 \$36.79 Va. Code Ann. § 34-26(4a) $\overline{\mathbf{Q}}$ **Queen Size Mattress** 100% of fair market П value, up to any Line from Schedule A/B: applicable statutory limit Va. Code Ann. § 34-26(4a) Brief description: \$450.00 \$450.00 $\overline{\mathbf{Q}}$ 3 TVs, 1 Stereo, 2 Computer, 1 Tablet, 1 100% of fair market Record Player, 1 Cellphone value, up to any Line from Schedule A/B: 7 applicable statutory limit Brief description: \$600.00 \$600.00 Va. Code Ann. § 34-4 $\sqrt{}$ 3 Sets Golf Clubs, 4 Hand Weights, 2 Push 100% of fair market Mowers, 2 Weed Eaters, 10 Power Tools, value, up to any 30 video Game, 2 Game Systems, 3 applicable statutory limit **Bicycles** Line from Schedule A/B: Brief description: \$500.00 \$500.00 Va. Code Ann. § 34-26(4) \square Men's Clothing and Women's Clothing 100% of fair market value, up to any Line from Schedule A/B: 11 applicable statutory limit Brief description: \$55.00 \$55.00 Va. Code Ann. § 34-4 $\overline{\mathbf{Q}}$ 2 Watches, 5 Earings, 5 Necklaces, 1 100% of fair market Other Ring value, up to any applicable statutory Line from Schedule A/B: 12 limit Brief description: \$100.00 Va. Code Ann. § 34-4 \$1.00 \square 2 Wedding Bands 100% of fair market (1st exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 12 limit Brief description: \$100.00 Va. Code Ann. § 34-26(1a) \$100.00 $\overline{\mathbf{Q}}$ 2 Wedding Bands 100% of fair market (2nd exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 12 limit Brief description: \$20.00 \$20.00 Va. Code Ann. § 34-26(5) \square 2 Dog 100% of fair market value, up to any Line from Schedule A/B: 13 applicable statutory limit Brief description: \$320.00 \$320.00 Va. Code Ann. § 34-26(6) \square 3 Eyeglasses, 1 Nebulizer 100% of fair market value, up to any Line from Schedule A/B: 14 applicable statutory limit

Debtor 1

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Nicholas Charles Grady Debtor 2 **Brandie Marie Grady** Case number (if known) Part 2: **Additional Page** Current value of Brief description of the property and line on Amount of the Specific laws that allow exemption Schedule A/B that lists this property the portion you exemption you claim own Copy the value from Check only one box for Schedule A/B each exemption Brief description: \$25.00 \$25.00 Va. Code Ann. § 34-4 $\overline{\mathbf{Q}}$ Cash 100% of fair market П value, up to any Line from Schedule A/B: 16 applicable statutory limit Va. Code Ann. § 34-4 Brief description: \$170.00 \$170.00 $\overline{\mathbf{Q}}$ **Dupont Checking account** 100% of fair market value, up to any Line from Schedule A/B: 17.1 applicable statutory limit Brief description: Va. Code Ann. § 34-4 \$1.00 \$1.00 $oldsymbol{
abla}$ **Dupont Savings account** 100% of fair market value, up to any Line from Schedule A/B: 17.2 applicable statutory limit Brief description: \$5.00 \$5.00 Va. Code Ann. § 34-4 \square **TCF Savings account** 100% of fair market value, up to any Line from Schedule A/B: 17.3 applicable statutory limit Brief description: \$8,358.13 Va. Code Ann. § 34-4 \$1.00 \square 401(k) ERISA 100% of fair market (1st exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 21 limit Brief description: \$8,358.13 \$1.00 Va. Code Ann. § 34-34 ☑ 401(k) ERISA 100% of fair market (2nd exemption claimed for this asset) value, up to any applicable statutory Line from Schedule A/B: 21 limit Brief description: \$8,358.13 \$8,358.13 11 U.S.C. § 522(b)(3)(C) $\sqrt{}$ 401(k) ERISA 100% of fair market (3rd exemption claimed for this asset) value, up to any Line from Schedule A/B: 21 applicable statutory limit Brief description: \$1.00 Va. Code Ann. § 34-4 \$1.00 $\overline{\mathbf{Q}}$ **Term Life Insurance No Cash Value** 100% of fair market (1st exemption claimed for this asset) value, up to any Line from Schedule A/B: ____31 applicable statutory limit Brief description: Va. Code Ann. §§ 38.2-3122, 3123 \$1.00 \$1.00 $\overline{\mathbf{Q}}$ **Term Life Insurance No Cash Value** 100% of fair market (2nd exemption claimed for this asset) value, up to any Line from Schedule A/B: 31 applicable statutory limit

Debtor 1

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Debtor 1 Debtor 2	Nicholas Charles Grady Brandie Marie Grady			Case number	(if known)	
Part 2:	Additional Page					
	ription of the property and line on A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B		eck only one box for h exemption		
Brief descri	•	\$2,355.00	$\overline{\mathbf{V}}$	\$697.00	Va. Code Ann. § 34-4	
this time, refunds, 6 approxim. \$2355.50(garnishm proceeds action tha any claim and/or inf (1st exem	funds due to debtor, unknown at including State and Federal Tax including State and Including Stat			100% of fair market value, up to any applicable statutory limit		
this time, refunds, 6 approxim \$2355.50(garnishm proceeds action tha any claim and/or inf (2nd exen	funds due to debtor, unknown at including State and Federal Tax including State and Includ	<u>\$2,355.00</u>		\$1,658.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann § 34-26(9)	
	ption: ent Funds chedule A/B: 35	\$200.00		\$200.00 100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4	

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Fill in this inf	ormation to ide	entify your cas	e:			
Debtor 1	Nicholas	Charles	Grady			
	First Name	Middle Name	Last Name			
Debtor 2	Brandie	Marie	Grady			
(Spouse, if filing)		Middle Name	Last Name			
United States Bar	nkruptey Court for t	he: WESTERN D	ISTRICT OF VIRGINI	Δ		
	includitor count for t	TIC. TILOTERIA	IOTAGE OF VIRGINE			
Case number (if known)					☐ Check if this is	s an
(ii iuiewii)					amended filing	J
Official Form	106D					
Schedule D:	Creditors V	Vho Have Cl	aims Secured b	y Property		12/15
Correct information On the top of any 1. Do any credit □ No. Che □ Yes. Fill Part 1: Lis 2. List all securoclaim, list the creditor has a much as poss	on. If more space additional pages, tors have claims so the claims of the information and the company of the claims. If a creation separately particular claim, listible, list the claims	is needed, copy the write your name a secured by your promit this form to the ation below.	n one secured nore than one sin Part 2. As	t out, number the entri	es, and attach it to thi	s form.
creditor's nam	ie.			value of collateral	claim	If any
2.1		Describe the secures the	ne property that	\$7,058.00	\$4,025.00	\$3,033.00
Lendmark Finan	icial Services	2004 Hone				
Creditor's name 1735 North Brow	vn Road	2004 110110	ua Accord			
Number Street	VII ROdu					
Suite 300						
			ate you file, the claim is	s: Check all that apply.		
Lawrenceville	GA 30043	Conting				
City	State ZIP Code	Dispute				
Who owes the del	ot? Check one.	Dispute		,		
☐ Debtor 1 only			en. Check all that apply		car loan)	
Debtor 2 only			eement you made (such		car loan)	
Debtor 1 and D	Debtor 2 only	=	ry lien (such as tax lien,	mechanic's lien)		
At least one of	the debtors and ar	other —	ent lien from a lawsuit ncluding a right to offset)		
		Autom		,		
to a communi						
Date debt was inc	urred <u>09/2018</u>	Last 4 digit	s of account number	2 9 0 8		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$7,058.00

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Debtor 1 Nicholas Charles Gra Debtor 2 Brandie Marie Grady	dy 	Case number (if known)					
Part 1: Additional Page After listing any entries sequentially from the page.	s on this page, number them revious page.	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any			
Progressive Leasing Creditor's name 256 West Data Drive Number Street	secures the claim: ogressive Leasing ditor's name 6 West Data Drive		\$250.00				
Draper UT 84020 City State ZIP Code Who owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this claim relates to a community debt	Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as tax lien, must be such as tax lien, must be su	Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)					
Date debt was incurred	Last 4 digits of account number	5 8 1 5					

Add the dollar value of your entries in Column A on this page. Write that number here:

\$213.21

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$7,271.21

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Fill in this inf	ormation to id	entify your c	ase:							
Debtor 1	Nicholas	Charles		Grady	.					
	First Name	Middle Name		Last Name						
Debtor 2	Brandie	Marie		Grady	.					
(Spouse, if filing)	First Name	Middle Name		Last Name						
United States Bar	nkruptcy Court for	the: WESTERN	N DIS	TRICT OF VIRGINIA						
Case number (if known)									Check if this is a amended filing	ın
Official Form	106E/F									
Schedule E/	F: Creditors	Who Have	e Ur	secured Claims						12/15
If more space is n to this page. On t	eeded, copy the I he top of any add	Part you need, fi itional pages, w RIORITY Uns	ill it or vrite y secur		boxe	s on	the le			, , ,
 Do any credit 	tors have priority	unsecured clair	ms ag	ainst you?						
☐ No. Go t ✓ Yes.	o Part 2.									
claim. For ear show both price more space is	ch claim listed, ide ority and nonpriorit	ntify what type of y amounts. As n y unsecured clair	f claim	or has more than one priority it is. If a claim has both priors possible, list the claims in a out the Continuation Page of	rity an alphab	d nor etical	priori orde	ty amo	ounts, list that clair	n here and or's name. If
(For an explar	nation of each type	of claim, see the	e instr	uctions for this form in the ins	tructio	n boo	klet.			
	,						l claiı	n	Priority amount	Nonpriority amount
2.1							\$^	1.00	\$1.00	\$0.00
Internal Revenu			- Last	4 digits of account number	6	4	3	6		
Priority Creditor's Nam P O Box 7346 Number Street	ie			n was the debt incurred?	201	3		<u> </u>	-	
			- As c	f the date you file, the clain	is: C	heck	all th	at ann	lv.	
				Contingent			u	ar app	.,.	
Philadelphia	PA	19101		Jnliquidated						
City		ZIP Code	- V	Disputed						
Who incurred the	debt? Check or	ne.	Тур	of PRIORITY unsecured cl	aim:					
Debtor 1 only				Domestic support obligations						
Debtor 2 only Debtor 1 and D	Debtor 2 only			Taxes and certain other debts	•		•		ent	
	the debtors and a	nother		Claims for death or personal i ntoxicated	rijury \	vriile '	you w	eie		
_	laim is for a com	munity debt		Other. Specify						
Is the claim subje	ct to offset?		_							
✓ No Yes										

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Debtor 1 Debtor 2	Brandie Ma		•		Case	numb	oer (i	f know	n)				
Part 1:	Your PRI	ORITY	' Unsecured C	laims Continuation Page									
After listin		n this p	age, number the	n sequentially from the		Tota	al cla	im	Priority amount	Nonpriority amount			
2.2					_		\$	51.00	\$1.00	\$0.00			
	tment Of Tax	ation*		- Last 4 digits of account number	6	4	3	6					
Priority Credi	tor's Name uthority Cons	ultina 9	Services PC	When was the debt incurred?	_		- -	- -					
Number	Street	untiling (50: 1:000, 1 0	_ when was the debt incurred?	<u>201</u>	<u> </u>			_				
P O Box 2	2156			As of the date you file, the claim	- As of the date you file, the claim is: Check all that apply.								
				Contingent	13. (JIICCK	l all t	παι αρ	piy.				
				Unliquidated									
Richmon	d	VA	23218-0000	_ ☑ Disputed									
City		State	ZIP Code										
	red the debt?	Check	one.	Type of PRIORITY unsecured cla	aim:								
✓ Debtor Debtor	,			☐ Domestic support obligations✓ Taxes and certain other debts	VOLL (owe tl	he ac	overnm	nent				
	1 and Debtor 2 t one of the deb	•	l another	Claims for death or personal ir intoxicated	•		_						
☐ Check	if this claim is	for a co	mmunity debt	Other. Specify									
_	n subject to off		•										
No No													
Yes													

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Debtor 1 Nicholas Charles Grady Debtor 2 Brandie Marie Grady	Case number (if known)
Part 2: List All of Your NONPRIORIT	
Yes 4. List all of your nonpriority unsecured claims If a creditor has more than one nonpriority unse type of claim it is. Do not list claims already inc	I claims against you? . Submit this form to the court with your other schedules. in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what luded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2.
Allied Business Services Nonpriority Creditor's Name PO Box 1799 Number Street	\$249.51 Last 4 digits of account number 2 0 0 1 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed
Holland City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Open Account
Allied Collection Services Nonpriority Creditor's Name Attn: Bankruptcy Number Street PO Box 1799 Holland MI 49422 City State ZIP Code Who incurred the debt? Check one.	\$249.00 Last 4 digits of account number 8 9 6 4 When was the debt incurred? 02/2019 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes	Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collection Attorney

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Debtor 1 Nicholas Charles Grady Debtor 2 Brandie Marie Grady	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$224.43
Apelles	Last 4 digits of account number 1 3 4 3	-
Nonpriority Creditor's Name 3700 Corporate Drive Ste 240	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
Columbus OH 43231	Disputed	
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
Check if this claim is for a community debt	Open Account	
Is the claim subject to offset? ☑ No ☐ Yes		
4.4		\$342.00
AR Resources, Inc.	Last 4 digits of account number 5 7 6 1	
Nonpriority Creditor's Name ATTN: Bankruptcy	When was the debt incurred? 12/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 1056	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Blue Bell PA 19422		
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collection Attorney	
✓ No		
Yes		
4.5 AR Resources, Inc.	Last 4 digits of account number 5 7 6 2	\$233.00
Nonpriority Creditor's Name	When was the debt incurred? 12/2017	
ATTN: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 1056	☐ Contingent☐ Unliquidated☐ Disputed	
Blue Bell PA 19422		
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collection Attorney	
No Yes		

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Debtor 1 Nicholas Charles Grady Debtor 2 Brandie Marie Grady	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$115.00
Augusta County Disposible	Last 4 digits of account number	
Nonpriority Creditor's Name PO BOX 538	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	Disputed	
Waynesboro VA 22980 City State ZIP Code	Type of NONDDIODITY upgestred eleims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Open Account	
Is the claim subject to offset?		
☑ No □ Yes		
4.7		\$159.06
Augusta Health	Last 4 digits of account number8 _3 _2 _4_	
Nonpriority Creditor's Name P.O. Box 1000	When was the debt incurred?	
Number Street 78 Medical Center Drive	As of the date you file, the claim is: Check all that apply.	
70 Medical Celiter Drive	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
Fish sussilla VA 00000	— ☐ Disputed	
Fishersville VA 22939 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Open Account	
Is the claim subject to offset?		
☑ No □ Yes		
$\overline{\Box}$		
4.8		\$38.33
Beaumont Hospitals Nonpriority Creditor's Name	Last 4 digits of account number 2 0 2	
PO Box 5042	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
Troy MI 48007	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Medical	
Is the claim subject to offset? ✓ No		
Yes		

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Debtor 1 Nicholas Charles Grady Debtor 2 Brandie Marie Grady	Case number (if known)	
Part 2: Your NONPRIORITY Unsec	ured Claims Continuation Page	
After listing any entries on this page, number the previous page.	nem sequentially from the	Total claim
4.9		\$206.00
Bull City Financial Solutions Nonpriority Creditor's Name	Last 4 digits of account number 7 9 3 0	
2609 North Duke Street	When was the debt incurred? 06/2017	
Number Street Suite 500	As of the date you file, the claim is: Check all that apply.	
Cuite 500	☐ Contingent ☐ Unliquidated	
Durcham NC 27704	Disputed	
Durham NC 27704 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	Collection Attorney	
Is the claim subject to offset?		
No Yes		
Yes		
4.10		\$206.00
Bull City Financial Solutions	Last 4 digits of account number 6 6 0 1	
Nonpriority Creditor's Name	When was the debt incurred? 12/2016	
2609 North Duke Street Number Street	As of the date you file, the claim is: Check all that apply.	
Suite 500	Contingent	
	── ☐ Unliquidated ── ☐ Disputed	
Durham NC 27704		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	☐ Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt Is the claim subject to offset?	Collection Attorney	
No		
Yes		
4 11		****
Chase Auto Finance	Lost 4 digits of account number 4 4 0 7	\$11,334.00
Chase Auto Finance Nonpriority Creditor's Name	Last 4 digits of account number 1 4 0 7 When was the debt incurred? 01/2017	
Attn: Bankruptcy	When was the debt incurred? 01/2017 As of the date you file, the claim is: Check all that apply.	
Number Street PO Box 901076	Contingent	
	Unliquidated	
Fort Worth TX 76101	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	Automobile	
Is the claim subject to offset?		
☑ No □ Yes		

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Debtor 1 Nicholas Charles Grady Debtor 2 Brandie Marie Grady	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.12		\$50.00
Comprehensive Behavioral Health	Last 4 digits of account number 1 5 9 0	
Nonpriority Creditor's Name PO Box 1138	When was the debt incurred?	
Number Street	 As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed 	
Fishersville VA 22939 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical	
4.13		CC54.20
Credence	Last 4 digits of account number 2 8 4 0	\$654.39
Nonpriority Creditor's Name	When was the debt incurred?	
17000 Dallas PKWY Number Street	As of the date you file, the claim is: Check all that apply.	
Suite 204	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Dallas TX 75248		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations grising out of a congression agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
—	Other. Specify	
Check if this claim is for a community debt Is the claim subject to offset?	Open Account	
☑ No □ Yes		
4.14		\$208.00
Credit Control Corp	Last 4 digits of account number 3 0 2 7	
Nonpriority Creditor's Name PO Box 120568	When was the debt incurred? 04/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	Disputed	
Newport News VA 23612 City State ZIP Code	Type of NONDRIGHTY unsecured slaim:	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset?		
☑ No □ Yes		

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Debtor 1 Nicholas Charles Grady Debtor 2 Brandie Marie Grady	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.15		\$122.00
Debt Recovery Solution	Last 4 digits of account number 3 4 9 7	Ψ122.00
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 02/14/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
6800 Jericho Turnpike Suite 113E	_ ☐ Contingent ☐ Unliquidated	
Consent NV 44704	Disputed	
Syosset NY 11791 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Unknown Loan Type	
Is the claim subject to offset? ✓ No		
☑ No ☐ Yes		
-		
4.16		\$654.00
Diversified Consultants, Inc. Nonpriority Creditor's Name	Last 4 digits of account number4065_ When was the debt incurred? 12/2018	
Attn: Bankruptcy Number Street	When was the debt incurred? 12/2018 As of the date you file, the claim is: Check all that apply.	
PO Box 679543	_ ☐ Contingent	
	Unliquidated	
Dallas TX 75267	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ✓ Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another Check if this claim is for a community debt	Other. Specify	
Is the claim subject to offset?	Collection Attorney	
☑ No		
Yes		
4.17		\$224.43
Fisherman Group	Last 4 digits of account number 5 8 6 7	
Nonpriority Creditor's Name 800 W. Long Lake Rd	When was the debt incurred?	
Number Street Ste 170	As of the date you file, the claim is: Check all that apply.	
0.0 170	_ ☐ Contingent ☐ Unliquidated	
Bloomfield Hills MI 48302	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Open Account	
Is the claim subject to offset? ✓ No		
☐ Yes		

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Debtor 1 Nicholas Charles Grady Debtor 2 Brandie Marie Grady	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.18		\$476.00
Focus Receivables Mana	Last 4 digits of account number 5 2 9 0	<u> </u>
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 03/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
1130 Northchase Parkway Ste 150	Contingent Unliquidated	
Mariatta CA 20067	Disputed	
Marietta GA 30067 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset? ✓ No		
☑ No □ Yes		
4.19		\$63.95
Frost-Arnett Company Nonpriority Creditor's Name	Last 4 digits of account number V 3 1 4	
PO Box 198988	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. ☐ Contingent	
	Unliquidated	
Nashville TN 37219-8988	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
☐ Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Open Account	
Is the claim subject to offset? ☑ No		
Yes		
4.20		\$2,504.26
Henry Ford Health	Last 4 digits of account number 3 6 7 6	
Nonpriority Creditor's Name PO Box 553920	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	Disputed	
Detroit MI 48255 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
☐ Debtor 1 only ☐ Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
☑ No □ Yes		

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Debtor 1 Nicholas Charles Grady Debtor 2 Brandie Marie Grady	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.21		\$66.00
J.J. Marshall & Associates	Last 4 digits of account number916 8	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 11/2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
28820 Mound Rd	_ ☐ Contingent ☐ Unliquidated	
	□ Disputed	
Warren MI 48092		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	✓ Other. Specify	
Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset? ✓ No		
Yes		
4.22		\$187.00
LJ Ross Associates	Last 4 digits of account number6557_	
Nonpriority Creditor's Name 4 Universal Way	When was the debt incurred? 04/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 6099	_ ☐ Contingent ☐ Unliquidated	
	□ Disputed	
Jackson MI 49204		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a congration agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset? ✓ No		
☑ No □ Yes		
4.23		\$27.01
LJ Ross Associates	Last 4 digits of account number	
Nonpriority Creditor's Name 4 Universal Way	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 6099	_ ☐ Contingent ☐ Unliquidated	
	— ☐ Disputed	
Jackson MI 49204 City State ZIP Code	— (NANDRIADIE)	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
—	Other. Specify	
Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset? ✓ No		
✓ NO Yes		

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Debtor 1 Nicholas Charles Grady Debtor 2 Brandie Marie Grady	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.24		\$129.00
Merchants & Medical Credit Corp	Last 4 digits of account number 4 9 6 5	4120.00
Nonpriority Creditor's Name ATTN: Bankruptcy	When was the debt incurred? 05/2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
6324 Taylor Drive	_ ☐ Contingent ☐ Unliquidated	
	Disputed	
Flint MI 48507 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
☐ Debtor 1 only ☐ Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset?		
☑ No □ Yes		
4.25		\$670.00
Midland Funding Nonpriority Creditor's Name	Last 4 digits of account number5299	
2365 Northside Dr Ste 300	When was the debt incurred? 11/2017	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
San Diego CA 92108	Disputed	
San Diego CA 92108 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Factoring Company Account	
Is the claim subject to offset?		
☑ No □ Yes		
4.26		\$637.00
Midland Funding Nonpriority Creditor's Name	Last 4 digits of account number5 _ 9 _ 4 _ 3 _	
2365 Northside Dr Ste 300	When was the debt incurred? 09/2017	
Number Street	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
San Diego CA 92108	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
Check if this claim is for a community debt	Factoring Company Account	
Is the claim subject to offset? ✓ No		
Yes To		

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Debtor 1 Nicholas Charles Grady Debtor 2 Brandie Marie Grady	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.27		\$1,440.00
Midland Funding	Last 4 digits of account number	
Nonpriority Creditor's Name 2365 Northside Dr Ste 300	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
San Diego CA 92108 City State ZIP Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	Open Account	
☑ No		
Yes		
4.28		¢cc of
Mighigan Head and Spine	Last 4 digits of account number	\$66.95
Nonpriority Creditor's Name	When was the debt incurred?	
2319 Momentum Place Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	Contingent	
	Unliquidated	
Chicago IL 60689	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Medical	
Is the claim subject to offset?		
☑ No □ Yes		
4.29		\$50.00
Movement Orthopedics	Last 4 digits of account number 4 3 7 9	
Nonpriority Creditor's Name 43475 Dalcoma Drive	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
Clintion, TWP, MI 48038	_ Contingent	
	☐ Unliquidated ☐ Disputed	
City State 7ID Code		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Open Account	
Is the claim subject to offset?	Open Account	
No		
T Yes		

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Debtor 1 Nicholas Charles Grady Debtor 2 Brandie Marie Grady	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.30		\$50.00
Movement Orthopedics Nonpriority Creditor's Name 43475 Dalcoma Drive Number Street Clintion, TWP, MI 48038	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply.	
	☐ Contingent☐ Unliquidated☐ Disputed	
City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Open Account	
Is the claim subject to offset? ☑ No ☐ Yes		
4.31		\$504.00
Penn Credit Nonpriority Creditor's Name	Last 4 digits of account number 0 8 1 9	
Attn: Bankruptcy	When was the debt incurred? 05/2019	
Number Street PO Box 988	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
Harrisburg PA 17108 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
Check if this claim is for a community debt Is the claim subject to offset? ✓ No	Collection Attorney	\$982.22
Portfolio Recover	Last 4 digits of account number	\$902.22
Nonpriority Creditor's Name DEPT 922	When was the debt incurred?	
Number Street PO Box 4115	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	
Concord CA 94524 City State ZIP Code	' _	
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
Is the claim subject to offset?	Open Account	
✓ No ☐ Yes *Under Kathleen		

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Debtor 2 Brandie Marie Grady Brandie Marie Grady	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.33		\$560.00
Portfolio Recovery	Last 4 digits of account number 7 1 4 0	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 09/21/2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
120 Corporate Blvd	_ ☐ Contingent ☐ Unliquidated	
N () N ()	Disputed	
Norfold VA 23502 City State ZIP Code		
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Unknown Loan Type	
Is the claim subject to offset?	•	
☑ No		
Yes		
4.34		\$11.08
Premier Vascular Care PC	Last 4 digits of account number 0 2 0 0	
Nonpriority Creditor's Name	When was the debt incurred?	
1701 South Blvd East Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Rochester Hilll MI 48307		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify	
Is the claim subject to offset?	Open Account	
✓ No		
Yes		
4.35		\$476.40
Sequium Assest Solutions	Last 4 digits of account number 5 2 9 0	
Nonpriority Creditor's Name	When was the debt incurred?	
1130 North Chase Parkway Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent	
	Unliquidated	
Marietta GA 30067	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Open Account	
Is the claim subject to offset? ☑ No		
Yes		

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Debtor 1 Nicholas Charles Grady Debtor 2 Brandie Marie Grady	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.36		\$15,567.14
Social Security Administration	Last 4 digits of account number	
Nonpriority Creditor's Name c/o Timothy J. Heaphy	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
310 1st Street, S.W. Room 906	_ ☐ Contingent ☐ Unliquidated	
Decreales VA 04044	Disputed	
Roanoke VA 24011 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Open Account	
Is the claim subject to offset? ✓ No		
Yes		
4.37		****
Southwest Credit Systems	Last 4 digits of account number 4 0 6 6	\$638.00
Nonpriority Creditor's Name	Last 4 digits of account number 4 0 6 6 When was the debt incurred? 02/2019	
4120 International Parkway Number Street	As of the date you file, the claim is: Check all that apply.	
Suite 1100	_ ☐ Contingent	
	☐ Unliquidated ☐ Disputed	
Carrollton TX 75007		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt	✓ Other. Specify Collection Attorney	
Is the claim subject to offset?	•	
☑ No □ Yes		
4.38		\$63.00
St John's Provadance Nonpriority Creditor's Name	Last 4 digits of account number	
14127 North	When was the debt incurred?	
Number Street PO BOX 14000	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
Belfast ME 04915	Disputed	
City State ZIP Code Who incurred the debt? Check one	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. ☐ Debtor 1 only	Student loans Obligations arising out of a congretion agreement or diverse	
Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt		
Is the claim subject to offset?	MEGICAI	
✓ No		
☐ Yes		

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Debtor 1 Nicholas Charles Grady Debtor 2 Brandie Marie Grady	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.39		\$2,500.00
Steven Windsor	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 52	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Greenville VA 24440		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Open Account	
☑ No		
Yes		
4.40		\$145.00
Transworld Sys Inc/51	Last 4 digits of account number 9 8 2 5	\$145.00
Nonpriority Creditor's Name	When was the debt incurred? 02/2018	
Attn: Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 15618	_ ☐ Contingent	
	Unliquidated	
Wilmington DE 15618	─	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another		
Check if this claim is for a community debt	Collection Attorney	
Is the claim subject to offset? ✓ No		
☑ No □ Yes		
4.41		\$129.26
United Collection Bureau, Inc Nonpriority Creditor's Name	_ Last 4 digits of account number 0 9 0 0	
5620 Southwyck Blvd Suite 206	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
Toledo OH 43614	Disputed	
Toledo OH 43614 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
☐ Debtor 1 only ☐ Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Open Account	
Is the claim subject to offset?		
☑ No □ Yes		

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Case number (if known)ut a Debt That You Already Listed						
ied about your bankruptcy, for a debt that you already listed in Parts 1 or 2. ollect from you for a debt you owe to someone else, list the original gency here. Similarly, if you have more than one creditor for any of the tional creditors here. If you do not have additional parties to be notified for it this page.						
On which entry in Part 1 or Part 2 did you list the original creditor?						
Line 4.16 of <i>(Check one):</i> Part 1: Creditors with Priority Unsecured Claims						
Part 2: Creditors with Nonpriority Unsecured Claims						
Last 4 digits of account number						
On which entry in Part 1 or Part 2 did you list the original creditor?						
Line of (Check one):						
Open Account Part 2: Creditors with Nonpriority Unsecured Claims						
Last 4 digits of account number						
On which entry in Part 1 or Part 2 did you list the original creditor?						
Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims						
Last 4 digits of account number						
On which entry in Part 1 or Part 2 did you list the original creditor?						
Line 4.37 of (Check one): Part 1: Creditors with Priority Unsecured Claims						

Southeastern

Comenity Bank

PO Box 182125

Comenity Bank

PO Box 182125

Number

City

Name

Columbus

PA

ОН

State

19398 ZIP Code

43218

ZIP Code

Last 4 digits of account number

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.33 of (Check one): Part 1: Creditors with Priority Unsecured Claims

Line 4.26 of (Check one):

Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Debtor 2	Nicholas Char Brandie Marie		-				Case	e number (if known)
Part 3:	List Others	to B	e Notified Abou	ut a Debt Tha	at Y	ou Already	/ Lis	sted Continuation Page
Consume	r Energy			On which er	ntry	in Part 1 or P	art 2	2 did you list the original creditor?
Name C/O Kevin	Fitzpatrick. Att	tv For	Creditor	Line 4.22	of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number	Street licial Drive, Ste				-	,	_	Part 2: Creditors with Nonpriority Unsecured Claims
Fairfax, V	·	000					_	
				Last 4 digits	of	account num	ber	
City		State	ZIP Code					
Credit On	e Bank*			On which er	ntry	in Part 1 or P	art 2	2 did you list the original creditor?
Name					-			Part 1: Creditors with Priority Unsecured Claims
PO Box 98 Number	Street					(Officer Offic).	_	Part 2: Creditors with Nonpriority Unsecured Claims
-							Y	Tart 2. Orealtors with Northhority Orisecured Claims
	_	NIV /	20422	Last 4 digits	of	account num	ber	
Las Vegas City	5	NV State	89193 ZIP Code	_				
Direct TV Name				On which er	ntry	in Part 1 or P	art 2	2 did you list the original creditor?
PO Box 10	05261 Street			Line	of_	(Check one):		Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Atlanta		GA	30348	 Last 4 digits 	of	account num	ber	
City		State	ZIP Code	_				
DTE Ener	gy			On which er	ntry	in Part 1 or P	art 2	2 did you list the original creditor?
Name PO Box 70	0515			Line 4.31	of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims
	Street				-	,	_	Part 2: Creditors with Nonpriority Unsecured Claims
				_	_		. –	
Charlotte		NC	28272-0515	Last 4 digits	ot	account num	ber	
City		State	ZIP Code	_				
MedExpre	ess			On which er	ntry	in Part 1 or P	art 2	2 did you list the original creditor?
Name 1751 Earl	Core Road			Line 4.40	of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Number	Street			<u> </u>	_		团	Part 2: Creditors with Nonpriority Unsecured Claims
				_			_	
Morganto	wn	wv	26505	Last 4 digits	of	account num	ber	
City		State	ZIP Code					
MedExpre	ess			On which er	ntry	in Part 1 or P	art 2	2 did you list the original creditor?
Name 1751 Earl	Core Road			— Line	of	(Check one):	П	Part 1: Creditors with Priority Unsecured Claims
	Street				-	,		Part 2: Creditors with Nonpriority Unsecured Claims
				— — Last 4 digits	of	account num	ber	
Morganto City	wn	WV State	26505 ZIP Code	_				

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Nicholas Charles Grady Debtor 2 **Brandie Marie Grady** Case number (if known) Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page MedStar On which entry in Part 1 or Part 2 did you list the original creditor? 100 Irving Street Nw Line 4.24 of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Washington DC 20010 ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? **Neurological Associates** 905 Cedar Creek Grade, Suite 200 Line 4.21 of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number Winchester VA 22601 City State ZIP Code **Philbin Law Office** On which entry in Part 1 or Part 2 did you list the original creditor? 30057 Orchard Lake Rds Line 4.27 of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Claims - Last 4 digits of account number **Farmington** ΜI 48334 **Shenandoah Emer Med Specialists** On which entry in Part 1 or Part 2 did you list the original creditor? 78 Medical Drive Line 4.5 of (Check one): \square Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number **Fishersville VA** 22939 ZIP Code State On which entry in Part 1 or Part 2 did you list the original creditor? **Shenandoah Emer Med Specialists** 78 Medical Drive Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number **Fishersville VA** 22939 ZIP Code **Southeaster Program Services Center** On which entry in Part 1 or Part 2 did you list the original creditor? 1200 Rev. Abraham Woods, Jr. Blvd Line 4.36 of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number **Birmingham** ΑL 35285 State ZIP Code

Debtor 1

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Debtor 1 Debtor 2	Brandie Marie		•	Case number (if known)
Part 3:	List Others	to B	e Notified Abou	ut a Debt That You Already Listed Continuation Page
	y of Virginia He	alth S	ystem	On which entry in Part 1 or Part 2 did you list the original creditor?
Name PO Box 7	43977			Line 4.14 of <i>(Check one):</i> Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				— Last 4 digits of account number
Atlanta City		GA State	30374 ZIP Code	_
	sicians Group			On which entry in Part 1 or Part 2 did you list the original creditor?
Name PO Box 9	007			Line 4.10 of <i>(Check one):</i> Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				— Last 4 digits of account number
Charlotte City	sville	VA State	22906-9007 ZIP Code	_
UVA Phys	sicians Group			On which entry in Part 1 or Part 2 did you list the original creditor?
Name PO Box 9	007			Line 4.9 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				— Last 4 digits of account number
Charlotte City	sville	VA State	22906-9007 ZIP Code	_

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Debtor 1	Nicholas Charles Grady		
Debtor 2	Brandie Marie Grady	Case number (if known)	
	•		

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Add the Amounts for Each Type of Unsecured Claim

				Total claim
Total claims	6a.	Domestic support obligations	6a.	\$0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$2.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. -	\$0.00
	6e.	Total. Add lines 6a through 6d.	6d.	\$2.00
				Total claim
Total claims from Part 2	6f.	Student loans	6f.	\$0.00
nom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. -	\$43,212.42
	6j.	Total. Add lines 6f through 6i.	6j.	\$43,212.42

Part 4:

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Fill in this inf	formation to i	dentify your case	:	
Debtor 1	Nicholas	Charles	Grady	
	First Name	Middle Name	Last Name	
Debtor 2	Brandie	Marie	Grady	
(Spouse, if filing)		Middle Name	Last Name	
United States Bo	inkriintov Court fo	or that WESTERN DI	STRICT OF VIRGI	INIIA
United States Ba	inkrupicy Court ic	or the: WESTERN DI	STRICT OF VIRGI	NIA
Case number				- ☐ Check if this is an
(if known)				amended filing
Official Form	1060			
Official Foffi	1 1000			
Schedule G	: Executory	y Contracts an	d Unexpired	Leases
□ No. Che	eck this box and f		ourt with your other so	chedules. You have nothing else to report on this form. s are listed on Schedule A/B: Property (Official Form 106A/B)
Yes. Fill	i in all of the inior	mation below even if the	ie contracts of leases	s are listed of Scriedule A/B. Property (Official Forth 100A/B)
is for (for exa	•	icle lease, cell phone)	•	ntract or lease. Then state what each contract or lease as for this form in the instruction booklet for more examples of
Person or	company with	whom you have the c	ontract or lease	State what the contract or lease is for
2.1 <u>Veritas li</u>	nstrument Ren	nal		1 Drum Kit, 1 Xilaphone
Name	Ith Ct N			Rent to own
12475 44 Number	Street			— 24/MO
				Contract to be ASSUMED
Clearwat	tor	FL	33762	
City	ici .	State	ZIP Code	-

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					_					
Fi	ll in this inf	ormation to id	lentify your case	:						
De	ebtor 1	Nicholas First Name	Charles Middle Name	Grady Last Name	_					
	ebtor 2	Brandie First Name	Marie Middle News	Grady	_					
(5)	pouse, if filing)	First Name	Middle Name	Last Name						
Un	nited States Bar	nkruptcy Court for	the: WESTERN DIS	STRICT OF VIRGINIA	_					
	se number known)				Check if this is an amended filing					
	icial Form	106H Your Code	ebtors			12/1				
two need	married peop ded, copy the	le are filing toget Additional Page,	her, both are equally fill it out, and numbe	responsible for supplying or the entries in the boxes of	Be as complete and accurate as possible. If correct information. If more space is on the left. Attach the Additional Page to this nown). Answer every question.					
1.	Do you have No Yes	any codebtors?	(If you are filing a jo	int case, do not list either spo	ouse as a codebtor.)					
2.					ory? (Community property states and territories Fexas, Washington, and Wisconsin.)					
	Yes. Did	l your spouse, forr	ner spouse, or legal e	quivalent live with you at the	time?					
	Yes									
3.	•	•		•	ebtor if your spouse is filing with you. List the or cosigner. Make sure you have listed the					

creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use

Column 1: Your codebtor

Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Fill in this inforr	nation to identify	y your case:					
Debtor 1	Nicholas First Name	Charles Middle Name	Grady Last Name		eck if this is:		
Debtor 2 (Spouse, if filing)	Brandie First Name	Marie Middle Name	Grady Last Name	_ _	An amended filing		
, , ,	cruptcy Court for the:	WESTERN DISTRICT OF VIRGINIA		_ 🗖	A supplement showing postpetition chapter 13 income as of the following date:		
Case number (if known)					MM / DD / YYYY		
Official Form 10	061				WWW, BB / TTTT		
Schedule I: Your Income 12/15							
te as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally							

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Р	art 1:	Describe Emple	oyment							
1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers.		tion. ve more than one ch a separate page mation about	Employment status	☐ Not employed				Debtor 2 or non-filing spouse ☑ Employed ☐ Not employed		
			Occupation	Trai	ner			Traffic Control		
Include part-time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies.			Employer's name	Target Distribution Center			Area Wide Protection 4244 Mt. Pleasant St NW Number Street			
		•	Employer's address	7000 Target Parkway Number Street						
				Mini City	neapolis	MN State	55445 Zip Code	North Canton City	OH State	44720 Zip Code
			How long employed ti	here?	10 Montl	hs		3 weeks		
						·				

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			For Debtor 1	For Debtor 2 or non-filing spouse
2.	List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$3,379.09	\$1,500.00
3.	Estimate and list monthly overtime pay.	3.	\$0.00	\$0.00
4.	Calculate gross income. Add line 2 + line 3.	4.	\$3,379.09	\$1,500.00

Official Form 106l Schedule I: Your Income page 1

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Debtor 1 **Nicholas Charles Grady** Debtor 2 **Brandie Marie Grady** Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$3,379.09 \$1,500.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$697.32 \$0.00 5b. Mandatory contributions for retirement plans \$0.00 \$0.00 5b \$202.63 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$433.33 \$0.00 5e. 5e. Insurance \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. 5h. Other deductions. \$0.00 \$0.00 Specify: 5h.+ Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f +6. \$1,333.28 \$0.00 5g + 5h. Calculate total monthly take-home pay. 7. Subtract line 6 from line 4. \$2,0<u>45</u>.81 \$1,500.00 List all other income regularly received: 8a. Net income from rental property and from operating a \$0.00 \$0.00 business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8b. \$0.00 \$0.00 8c. Family support payments that you, a non-filing spouse, or a \$0.00 \$0.00 dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 \$0.00 8e. Social Security 8e. \$0.00 \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any noncash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: \$0.00 \$0.00 8g. Pension or retirement income 8g. \$0.00 \$0.00 8h. Other monthly income. 8h. 🛊 Specify: \$0.00 \$0.00 Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. \$0.00 \$0.00 10. Calculate monthly income. Add line 7 + line 9. \$2,045.81 \$1,500.00 \$3,545.81 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly 12. \$3,545.81 income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, Combined if it applies. monthly income 13. Do you expect an increase or decrease within the year after you file this form? Note: Debtor 2 has not received first paycheck from new employer yet. Amout above is estimated. Yes. Explain:

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Fill in thi	s information to ide	entify your case:			Check if this	s ie:	
Debtor 1	Nicholas	Charles	Grady			s is: ended filing	
	First Name	Middle Name	Last Nar	me	A supp	lement showing	
Debtor 2	Brandie	Marie Middle None	Grady			r 13 expenses a: ng date:	s of the
(Spouse,		Middle Name	Last Nar			.9	_
	ates Bankruptcy Court for	the: WESTERN DIS	IRICI OF V	/IRGINIA	MM / D	D / YYYY	
Case num (if known)							
Official F	orm 106J						
Schedul	e J: Your Expen	ses					12/15
correct infor name and ca	lete and accurate as pos mation. If more space i ase number (if known).	s needed, attach anothe Answer every question.	er sheet to th				
Part 1:	Describe Your Ho	usehold					
1. Is this a	i joint case?						
✓ Yes	_	a separate household?		for Separate Househo	ld of Debtor	2.	
2. Do you	have dependents?	□ No		Dependent's relation	shin to	Dependent's	Does dependent
Do not li Debtor 2	ist Debtor 1 and 2.	Yes. Fill out this inf for each dependent		. B. i 4 4 B. I 4 6		age	live with you?
				Son		12	□ No - ☑ Yes
names.	state the dependents'						□ No
							- ☐ Yes ☐ No
							Yes
							No No
							- ☐ Yes ☐ No
							Yes
expense	r expenses include es of people other than f and your dependents?	✓ No ☐ Yes					
Part 2:	Estimate Your On	going Monthly Exp	enses				
to report exp	ur expenses as of your loenses as of a date after	the bankruptcy is filed					
-	enses paid for with non- ance and have included	_	-			Your expens	ses
	The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.					4	\$925.00
	cluded in line 4:	,					
4a. Re	al estate taxes					4a	
4b. Pro	pperty, homeowner's, or re	enter's insurance				4b	
4c. Ho	me maintenance, repair,	and upkeep expenses				4c	\$50.00
4d. Ho	meowner's association or	condominium dues				4d.	

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Debtor 1 Debtor 2		Nicholas Charles Grady Brandie Marie Grady Cas	e number	(if known)	
			o	Your expe	nses
_	A alalisia				
5. 6.	Utilitie	onal mortgage payments for your residence, such as home equity loans		5	
0.				60	¢200.00
		lectricity, heat, natural gas		6a	\$200.00
		/ater, sewer, garbage collection	(Catallita)	6b	\$100.00
		elephone, cell phone, Internet, satellite, and (Cable/ able services	Satellite)	bC	\$197.00
	6d. Of	ther. Specify: Cell Phone(s)		6d.	\$342.00
7.	Food a	and housekeeping supplies		7.	\$600.00
8.	Childc	are and children's education costs		8.	\$50.00
9.	Clothir	ng, laundry, and dry cleaning		9.	\$150.00
10.	Persor	nal care products and services		10.	\$50.00
11.	Medica	al and dental expenses		11.	\$200.00
12.		portation. Include gas, maintenance, bus or train Do not include car payments.		12.	\$400.00
13.		ainment, clubs, recreation, newspapers, tines, and books		13.	\$100.00
14.	Charita	able contributions and religious donations		14.	
15.	Insura				
	Do not	include insurance deducted from your pay or included in lines 4 or 20.			
	15a. I	Life insurance		15a	
	15b. I	Health insurance		15b	
	15c. \	Vehicle insurance		15c	\$94.80
		Other insurance. Specify:		15d	
16.	Taxes. Specify	Do not include taxes deducted from your pay or included in lines 4 or 20. Personal Property Taxes		16.	\$10.00
17.	Installr	ment or lease payments:			
	17a. (Car payments for Vehicle 1		17a	
	17b. (Car payments for Vehicle 2		17b	
	17c. (Other. Specify:		17c	
	17d. (Other. Specify: Progressive Leasing / Intrament Rental		17d	\$74.00
18.	-	payments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		18.	
19.	Other Specify	payments you make to support others who do not live with you.		19.	
20.		real property expenses not included in lines 4 or 5 of this form or on ule I: Your Income.			
	20a. I	Mortgages on other property		20a	
	20b. I	Real estate taxes		20b	
	20c. I	Property, homeowner's, or renter's insurance		20c	
	20d. I	Maintenance, repair, and upkeep expenses		20d	
	20e. I	Homeowner's association or condominium dues		200	

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\$100.00
\$3,642.80
\$3,642.80
\$3,545.81
\$3,642.80
(\$96.99)

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Fill in this inf	ormation to i	dentify your case	:	
Debtor 1	Nicholas First Name	Charles Middle Name	Grady Last Name	_]
Debtor 2	Brandie	Marie	Grady	
(Spouse, if filing)		Middle Name	Last Name	-
	nkruptcy Court fo	or the: WESTERN DIS	STRICT OF VIRGINIA	-
Case number (if known)				Check if amende

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Р	art 1: Summarize Your Assets	
		Your assets Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	
	1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$20,415.13
	1c. Copy line 63, Total of all property on Schedule A/B	\$20,415.13
P	art 2: Summarize Your Liabilities	
		Your liabilities Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	. \$7,271.21
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$2.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$43,212.42
	Your total liabilities	\$50,485.63
P	art 3: Summarize Your Income and Expenses	
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	. \$3,545.81
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$3,642.80

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Debtor 1 Debtor 2		Nicholas Charles Grady Brandie Marie Grady	Case number (if known)		
P	art 4:	Answer These Questions for Administrative and Statistic	al Records		
6.	Are y	ou filing for bankruptcy under Chapters 7, 11, or 13?			
	_	No. You have nothing to report on this part of the form. Check this box and sul Yes	bmit this form to the court with your other schedules.		
7.	What	kind of debt do you have?			
	كا	Your debts are primarily consumer debts. Consumer debts are those "incur family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statist			
		Your debts are not primarily consumer debts. You have nothing to report or this form to the court with your other schedules.	this part of the form. Check this box and submit		
8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$3,48					
9.	Сору	the following special categories of claims from Part 4, line 6 of <i>Schedule</i>	E/F:		
			Total claim		
	From	Part 4 on Schedule E/F, copy the following:			
	9a. I	Domestic support obligations. (Copy line 6a.)	\$0.00		
	9b	Taxes and certain other debts you owe the government. (Copy line 6b.)	\$2.00		
	9c. (Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00		
	9d. \$	Student loans. (Copy line 6f.)	\$0.00		
		Obligations arising out of a separation agreement or divorce that you did not repriority claims. (Copy line 6g.)	port as \$0.00		
	9f. I	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.	+\$0.00		
	9a -	Total Add lines 9a through 9f	\$2.00		

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				_
Fill in this inf	formation to ic	dentify your case	:	
Debtor 1	Nicholas First Name	Charles Middle Name	Grady Last Name	.]
Debtor 2 (Spouse, if filing)	Brandie First Name	Marie Middle Name	Grady Last Name	
United States Ba	ankruptcy Court for	the: WESTERN DIS	STRICT OF VIRGINIA	
Case number (if known)				Check if this is an amended filing
Official Form	106Dec			
Declaration	About an Ir	ndividual Debt	or's Schedules	12/15
concealing prope \$250,000, or impr	erty, or obtaining i	money or property by		ules. Making a false statement, bankruptcy case can result in fines up to , and 3571.
Did you pay	or agree to pay se	omeone who is NOT	an attorney to help you fill o	ut bankruptcy forms?
☑ No				
Yes. N	ame of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Brandie Marie Grady, Debtor 2

MM / DD / YYYY

Date <u>07/19/2019</u>

Nicholas Charles Grady, Debtor 1

MM / DD / YYYY

Date <u>07/19/2019</u>

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Fill	in this inf	ormation to ide	entify your	case:					
Deb	tor 1	Nicholas	Charles	Gra					
		First Name	Middle Name	_	Name				
	tor 2 ouse, if filing)	Brandie First Name	Marie Middle Name	Gra E Last	ady Name				
Unit	ed States Ba	nkruptcy Court for t	he: WFSTFR	N DISTRICT	OF VIRGIN	μΔ			
	e number	initiapley Court for t	WEOTER	N DIOTRIOT	OI VIICOII				
	nown)							Check if	
Offi.	oial Farm	107							9
	cial Form		\ f fa!	مريام والمراد	ala Filia	u fau Dau	l		04/40
Sta	tement c	of Financial A	Attairs for	inaiviaua	is Filin	g for Ban	kruptcy		04/19
corre	ct information	nd accurate as pos on. If more space i	s needed, atta	ch a separate	sheet to th	_		•	
your	name and ca	ase number (if kno	wn). Answer	every question	1.				
Par	t 1: Giv	ve Details Abοι	ıt Your Mar	ital Status a	ınd Where	You Lived	l Before		
1 \	Nhat is your	ourrent marital str	otus?						
_	What is your	current marital sta	itus ?						
i	Not marri	ed							
2. [Ouring the la	st 3 years, have yo	ou lived anywl	nere other than	n where you	live now?			
	□ No ■ Ves List	all of the places yo	u lived in the la	set 3 vears Do	not include	where you live	now.		
ı	Yes. List	all of the places yo		Dates Debto		ebtor 2:	, 110W.		Dates Debtor 2
	Debior 1:			lived there	<i>)</i> 1 1 L	eblor 2:			lived there
					1	Same as D	ebtor 1		☐ Same as Debtor 1
	17114 W	ales Drive		From 11/0 9	9/2017				From
		Street				lumber Street	:		-
				-	-				
	Macomb	MI	48044	_	_				_
	City	State	ZIP Code	_	C	ity	State	e ZIP Code	
	Debtor 1:			Dates Debto	or 1 [ebtor 2:			Dates Debtor 2
				lived there					lived there
					[Same as D	ebtor 1		☐ Same as Debtor 1
	172 Laur	al Hill Road		From 03/	/2016				From
	Number	Street		To 11/	/ 2017	lumber Street			 То
				-					_
	Raphine	VA	24472	_	_				_
	City	State	ZIP Code		C	ity	State	e ZIP Code	
3. \	Nithin the la	st 8 years, did you	ever live with	a enouse or le	onal onuiva	ent in a comr	munity proper	ty state or tor	itory?
		property states and		-				-	•
	-	and Wisconsin.)							
	☑ No □ Yes Mak	ke sure you fill out S	Schedule H [.] Yo	our Codebtors (Official Forn	106H)			

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	otor 1 otor 2	Nicholas Charles Grady Brandie Marie Grady	number (if known)			
Р	art 2:	Explain the Sources of	Your Income			
4.	Fill in the	u have any income from employ ne total amount of income you rec re filing a joint case and you have s. Fill in the details.	eived from all jobs and all bu	usinesses, including par	t-time activities.	alendar years?
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
		nry 1 of the current year until u filed for bankruptcy:	✓ Wages, commissions, bonuses, tips✓ Operating a business	\$23,551.06	☐ Wages, commissions, bonuses, tips ☐ Operating a business	
		calendar year:	✓ Wages, commissions, bonuses, tips	\$33,944.00	✓ Wages, commissions, bonuses, tips	\$384.98
(Jar	nuary 1 to	December 31,	Operating a business		Operating a business	
For the calendar year before that: (January 1 to December 31,		-	✓ Wages, commissions, bonuses, tips	\$40,000.00 (est.)	☐ Wages, commissions, bonuses, tips	
		December 31, 2017)	Operating a business		Operating a business	
5.	Include unempl and gar Debtor List eac	u receive any other income durincome regardless of whether the oyment; and other public benefit publing and lottery winnings. If you 1. The source and the gross income from the course of the course	at income is taxable. Examp payments; pensions; rental in u are in a joint case and you	les of other income are ncome; interest; dividen have income that you re	ds; money collected from la eceived together, list it only	awsuits; royalties;
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions
		ry 1 of the current year until u filed for bankruptcy:			Social Security	\$4,506.00
		calendar year: December 31, 2018)			Social Security	\$8,700.00
		endar year before that: December 31, 2017			Social Security	\$8,700.00

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		Nicholas Charles Gra Brandie Marie Grady	-			Case number (if kno	wn)
P	art 3:	List Certain Paym	ents You M	ade Before `	You Filed for Ba	ınkruptcy	
ò.	Are eithe	er Debtor 1's or Debtor	2's debts prim	narily consume	r debts?		
	□ No.	Neither Debtor 1 nor "incurred by an individ	-	-			d in 11 U.S.C. § 101(8) as
		During the 90 days be	fore you filed fo	or bankruptcy, d	id you pay any credit	or a total of \$6,825*	or more?
		☐ No. Go to line 7.					
		total amount	you paid that c	reditor. Do not i	total of \$6,825* or n include payments for ude payments to an	r domestic support o	bligations, such as
		* Subject to adjustmer	nt on 4/01/22 ar	nd every 3 years	after that for cases	filed on or after the	date of adjustment.
	∀ Yes.	Debtor 1 or Debtor 2	or both have p	orimarily consu	ımer debts.		
		During the 90 days be	fore you filed fo	or bankruptcy, d	id you pay any credit	or a total of \$600 or	more?
		No. Go to line 7.					
		creditor. Do	not include pay	ments for dome	total of \$600 or morestic support obligations this bankruptcy	ons, such as child su	
7.	Insiders corporati agent, in	ons of which you are an	ny general parti officer, director ss you operate	ners; relatives o r, person in cont	f any general partne rol, or owner of 20%	rs; partnerships of w or more of their voti	e who was an insider? hich you are a general partner; ng securities; and any managing s for domestic support obligations
	□ No ☑ Yes.	List all payments to an	insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	even Winder's name	dsor		_	\$1,500.00	\$2,500.00	_ Loaned money for moving to
	Box 52			Sept 2018	-July2019		Virginia
Nun	nber Stre	et		_			
				_			
Gre City	enville	VA State	24440 ZIP Code	_			
3.		year before you filed fo	or bankruptcy,	did you make	any payments or tr	ansfer any property	on account of a debt that
		oayments on debts guara	inteed or cosigi	ned by an inside	er.		
	☑ No	List all payments that b	J	•			

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	btor 1 Nicholas Charles Grady btor 2 Brandie Marie Grady	Case number	er (if known)				
P	Part 4: Identify Legal Actions, Repos	sessions, and Foreclosures					
9.	Within 1 year before you filed for bankruptcy, List all such matters, including personal injury ca- modifications, and contract disputes.		•				
	✓ No ☐ Yes. Fill in the details.						
10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.							
	No. Go to line 11.✓ Yes. Fill in the information below.						
		Describe the property	Date	Value of the property			
	ndmark Financial Services	Garnishemtn of Bank account	06/2019	\$6,000.00			
	35 North Brown Road						
	mber Street	Explain what happened					
Sui	iite 300	Property was repossessed.					
		Property was foreclosed.					
Lav	wrenceville GA 30043	Property was garnished.					
City		Property was attached, seized, or levied	l.				
11.	Within 90 days before you filed for bankruptcy amounts from your accounts or refuse to mak ✓ No	·	cial institution, set o	ff any			
	Yes. Fill in the details.						
12.	Within 1 year before you filed for bankruptcy, creditors, a court-appointed receiver, a custoo		of an assignee for t	he benefit of			
	✓ No ☐ Yes						
P	Part 5: List Certain Gifts and Contrib	utions					
13.	Within 2 years before you filed for bankruptcy	, did you give any gifts with a total value of r	nore than \$600 per	person?			
	✓ No☐ Yes. Fill in the details for each gift.						
14.	. Within 2 years before you filed for bankruptcy to any charity?	, did you give any gifts or contributions with	a total value of mor	e than \$600			
	✓ No✓ Yes. Fill in the details for each gift or contrib	ution.					

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		S Charles Grady Marie Grady Case number (if known)						
P	art 6:	List Ce	rtain L	osses				
15.		1 year befo disaster, or	-		uptcy or since you filed for bankruptcy, did y	you lose any	thing because of th	eft, fire,
	✓ No	s. Fill in the	details.					
P	art 7:	List Ce	rtain P	ayments or	Transfers			
16.		-	-		iptcy, did you or anyone else acting on you nkruptcy or preparing a bankruptcy petitior		or transfer any prop	perty to
	Include	any attorne	ys, bankr	ruptcy petition	preparers, or credit counseling agencies for se	ervices require	ed for your bankrupto	cy.
	□ No ✓ Ye	s. Fill in the	details.					
	x Law (Group PLL Was Paid	С		Description and value of any property tra See Exhibit A to form 2016.	ansferred	Date payment or transfer was made	Amount of payment
		ide Drive			_		7/11/2019	\$100.00
Num	Number Street						7/11/2019	\$1,500.00
Lyr City	nchburg	9	VA State	24501 ZIP Code	_			
Ema	il or webs	ite address			_			
Pers	on Who N	Made the Paym	nent, if Not	You	_			
17.		-	-		iptcy, did you or anyone else acting on you with your creditors or to make payments to			perty to
	Do not	include any	payment	or transfer tha	it you listed on line 16.			
	✓ No □ Ye	s. Fill in the	details.					
18.		-	-		ruptcy, did you sell, trade, or otherwise tran rse of your business or financial affairs?	nsfer any prop	perty to anyone, ot	her than
					rs made as security (such as granting of a secundary listed on this statement.	urity interest o	or mortgage on your	property).
	☑ No	s. Fill in the	details.					
19.		10 years be e a benefici	-		kruptcy, did you transfer any property to a s n called asset-protection devices.)	self-settled tr	ust or similar devic	e of which
	✓ No □ Ye	s. Fill in the	details.					

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	otor 1 otor 2	Nicholas Charles Grady Brandie Marie Grady	Case number (if known)
Р	art 8:	List Certain Financial Accounts, Instruments, Safe De	posit Boxes, and Storage Units
20.		1 year before you filed for bankruptcy, were any financial accounts of closed, sold, moved, or transferred?	or instruments held in your name, or for your
	Include	checking, savings, money market, or other financial accounts; certificate, pension funds, cooperatives, associations, and other financial institution	•
	✓ No ☐ Yes	s. Fill in the details.	
21.		now have, or did you have within 1 year before you filed for bankru urities, cash, or other valuables?	otcy, any safe deposit box or other depository
	✓ No	s. Fill in the details.	
22.	-	ou stored property in a storage unit or place other than your home w	rithin 1 year before you filed for bankruptcy?
	✓ No ☐ Yes	s. Fill in the details.	
Р	art 9:	Identify Property You Hold or Control for Someone El	se
23.	•	hold or control any property that someone else owns? Include any lin trust for someone.	property you borrowed from, are storing for,
	✓ No ☐ Yes	s. Fill in the details.	
Р	art 10:	Give Details About Environmental Information	
For	the purp	pose of Part 10, the following definitions apply:	
	hazardoı	mental law means any federal, state, or local statute or regulation co us or toxic substance, wastes, or material into the air, land, soil, surf g statutes or regulations controlling the cleanup of these substances	ace water, groundwater, or other medium,
		ans any location, facility, or property as defined under any environme or used to own, operate, or utilize it, including disposal sites.	ental law, whether you now own, operate, or
		us material means anything an environmental law defines as a haza ce, hazardous material, pollutant, contaminant, or similar item.	rdous waste, hazardous substance, toxic
Rep	oort all n	otices, releases, and proceedings that you know about, regardless of	of when they occurred.
24.	Has an law?	y governmental unit notified you that you may be liable or potentially	liable under or in violation of an environmental
	✓ No ☐ Yes	s. Fill in the details.	
25.	•	ou notified any governmental unit of any release of hazardous mater	ial?
	✓ No ☐ Yes	s. Fill in the details.	

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	otor 1 otor 2	Nicholas Charles Grady Brandie Marie Grady	Ca	ase number (if known)			
26.	Have you	u been a party in any judicial or administrative proceeding under any environmental law? Include settlements and					
	✓ No	s. Fill in the details.					
P	art 11:	Give Details About Your Business	or Connections to Any	Business			
27.	Within busine	4 years before you filed for bankruptcy, did ss?	you own a business or have a	ny of the following connections to any			
		A sole proprietor or self-employed in a trade, A member of a limited liability company (LLC A partner in a partnership An officer, director, or managing executive of An owner of at least 5% of the voting or equit) or limited liability partnership (I f a corporation				
	<u> </u>	None of the above applies. Go to Part 12. Check all that apply above and fill in the details.	ails below for each business.				
28.		2 years before you filed for bankruptcy, did ncial institutions, creditors, or other parties.		to anyone about your business? Include			
	□ No □ Yes	s. Fill in the details below.					
P	art 12:	Sign Below					
that pro	t answer perty by	the answers on this Statement of Financial As are true and correct. I understand that ma fraud in connection with a bankruptcy case U.S.C. §§ 152, 1341, 1519, and 3571.	king a false statement, conce	aling property, or obtaining money or			
-		olas Charles Grady X Charles Grady, Debtor 1	/s/ Brandie Marie Grady Brandie Marie Grady, Debtor 2				
I	Date	07/19/2019	Date 07/19/2019				
Did	you atta	nch additional pages to Your Statement of Fi	nancial Affairs for Individuals	Filing for Bankruptcy (Official Form 107)?			
	No Yes						
Did	you pay	or agree to pay someone who is not an atto	orney to help you fill out bankr	uptcy forms?			
		ame of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).			

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Fill in this information to identify your case:					
Debtor 1	Nicholas	Charles	Grady		
	First Name	Middle Name	Last Name		
Debtor 2	Brandie	Marie	Grady		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court fo	r the: WESTERN DIS	STRICT OF VIRGINIA		
Case number (if known)					
(II KIIOWII)					

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

١.	For any creditors that you listed in Part 1 of Schedule D: Creditors Who Hold Claims Secured by Property (Official Form 106D),
	fill in the information below

Identify the creditor and the property that is collateral		What do you intend to do with the property that secures a debt?		Did you claim the property as exempt on Schedule C?	
Creditor's name: Description of property securing debt:	Lendmark Financial Services 2004 Honda Accord		Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:		No Yes
Creditor's name:	Progressive Leasing		Surrender the property. Retain the property and redeem it.		No Yes
Description of property securing debt:	Queen Size Mattress		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:		

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Debtor 1 Debtor 2	Nicholas Ch Brandie Ma	narles Grady rie Grady		Case number (if known)		
Part 2:	List Your	Unexpired Personal P	ope	ty Leases		
fill in the i	nformation belo	w. Do not list real estate lea	ases.	Schedule G: Executory Contracts and Unexpi Unexpired leases are leases that are still in effort by lease if the trustee does not assume it. 11 U	ect; t	he lease period has not
Desc	ribe your unexp	ired personal property lease	es		Will	this lease be assumed?
	erty:	Veritas Instrument Rena 1 Drum Kit, 1 Xilaphone Rent to own 24/MO				No Yes
		ry, I declare that I have indic is subject to an unexpired I		ny intention about any property of my estate th	at se	ecures a debt and
Nichola	holas Charles as Charles Grady		Br	Brandie Marie Grady undie Marie Grady, Debtor 2 te 07/19/2019		
	MM / DD / YYYY	_	D	MM / DD / YYYY		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
•	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

 $\frac{\text{http://www.uscourts.gov/bkforms/bankruptcy_forms}}{\text{.html\#procedure.}}$

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case togethercalled a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF VIRGINIA HARRISONBURG DIVISION

In re	Nicholas Charles Grady	Case No.	
	Brandie Marie Grady		
		Chapter	7

		<u>-</u>
	DISCLOSURE OF COMPENSATION OF AT	TORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I a that compensation paid to me within one year before the filing of the petition services rendered or to be rendered on behalf of the debtor(s) in contemplais as follows:	n in bankruptcy, or agreed to be paid to me, for
	For legal services, I have agreed to accept	
	Prior to the filing of this statement I have received	\$1,600.00
	Balance Due	\$0.00
2.	The source of the compensation paid to me was:	
	☑ Debtor ☐ Other (specify)	
3.	The source of compensation to be paid to me is:	
	☑ Debtor ☐ Other (specify)	
4.	☑ I have not agreed to share the above-disclosed compensation with any associates of my law firm.	y other person unless they are members and
	☐ I have agreed to share the above-disclosed compensation with anothe associates of my law firm. A copy of the agreement, together with a lis compensation, is attached.	·
5.	In return for the above-disclosed fee, I have agreed to render legal service	for all aspects of the bankruptcy case, including:
	a. Analysis of the debtor's financial situation, and rendering advice to the d	ebtor in determining whether to file a petition in

- - bankruptcy;
 - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

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B2030 (Form 20)	030) (12/15)
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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me representation of the debtor(s) in this bankruptcy proceeding.	of for

07/19/2019 /s/ Heidi Shafer for Cox Law Group, PLLC

Date

Heidi Shafer for Cox Law Group, PLLC
Cox Law Group, PLLC
900 Lakeside Drive
Lynchburg, VA 24501-3602
Phone: (434) 845-2600 / Fax: (434) 845-0727

/s/ Nicholas Charles Grady

Nicholas Charles Grady

Brandie Marie Grady

Brandie Marie Grady

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UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF VIRGINIA HARRISONBURG DIVISION

IN RE: Nicholas Charles Grady Brandie Marie Grady

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

know	The above named Debtor hereby verifies that the ledge.	attached li	ist of creditors is true and correct to the best of his/her
Date	7/19/2019		/s/ Nicholas Charles Grady Nicholas Charles Grady
Doto	7/19/2019	Cianatura	/s/ Brandie Marie Grady

Brandie Marie Grady

Allied Business Services PO Box 1799 Holland, MI 49422

Allied Collection Services Attn: Bankruptcy PO Box 1799 Holland, MI 49422

Apelles 3700 Corporate Drive Ste 240 Columbus, OH 43231

AR Resources, Inc. ATTN: Bankruptcy PO Box 1056 Blue Bell, PA 19422

ATT
PO Box 10330
Fort Wayne, IN 46851

Augusta County Disposible PO BOX 538 Waynesboro, VA 22980

Augusta Health P.O. Box 1000 78 Medical Center Drive Fishersville, VA 22939

Beaumont Hospitals PO Box 5042 Troy, MI 48007

Bull City Financial Solutions 2609 North Duke Street Suite 500 Durham, NC 27704 Chase Auto Finance Attn: Bankruptcy PO Box 901076 Fort Worth, TX 76101

Check Into Cash 2121 Wards Road Lynchburg, VA 24502-0000

Comcast Cable PO Box 3006 Southeastern, PA 19398

Comenity Bank PO Box 182125 Columbus, OH 43218

Comprehensive Behavioral Health PO Box 1138 Fishersville, VA 22939

Consumer Energy C/O Kevin Fitzpatrick, Atty For Creditor 10615 Judicial Drive, Ste 603 Fairfax, VA 220303

Credence 17000 Dallas PKWY Suite 204 Dallas, TX 75248

Credit Control Corp PO Box 120568 Newport News, VA 23612

Credit One Bank*
PO Box 98873
Las Vegas, NV 89193

Debt Recovery Solution Attn: Bankruptcy 6800 Jericho Turnpike Suite 113E Syosset, NY 11791

Direct TV PO Box 105261 Atlanta, GA 30348

Diversified Consultants, Inc. Attn: Bankruptcy PO Box 679543 Dallas, TX 75267

DTE Energy PO Box 70515 Charlotte, NC 28272-0515

Fisherman Group 800 W. Long Lake Rd Ste 170 Bloomfield Hills, MI 48302

Focus Receivables Mana Attn: Bankruptcy 1130 Northchase Parkway Ste 150 Marietta, GA 30067

Frost-Arnett Company PO Box 198988 Nashville, TN 37219-8988

Henry Ford Health PO Box 553920 Detroit, MI 48255

Internal Revenue Service***
P O Box 7346
Philadelphia, PA 19101

J.J. Marshall & Associates Attn: Bankruptcy 28820 Mound Rd Warren, MI 48092

Lendmark Financial Services 1735 North Brown Road Suite 300 Lawrenceville, GA 30043

LJ Ross Associates 4 Universal Way PO Box 6099 Jackson, MI 49204

MedExpress 1751 Earl Core Road Morgantown, WV 26505

MedStar 100 Irving Street Nw Washington, DC 20010

Merchants & Medical Credit Corp ATTN: Bankruptcy 6324 Taylor Drive Flint, MI 48507

Midland Funding 2365 Northside Dr Ste 300 San Diego, CA 92108

Mighigan Head and Spine 2319 Momentum Place Chicago, IL 60689

Movement Orthopedics 43475 Dalcoma Drive Clintion, TWP, MI 48038 Neurological Associates 905 Cedar Creek Grade, Suite 200 Winchester, VA 22601

Penn Credit Attn: Bankruptcy PO Box 988 Harrisburg, PA 17108

Philbin Law Office 30057 Orchard Lake Rds Farmington, MI 48334

Portfolio Recover DEPT 922 PO Box 4115 Concord, CA 94524

Portfolio Recovery Attn: Bankruptcy 120 Corporate Blvd Norfold, VA 23502

Premier Vascular Care PC 1701 South Blvd East Rochester Hilll, MI 48307

Progressive Leasing 256 West Data Drive Draper, UT 84020

Sequium Assest Solutions 1130 North Chase Parkway Marietta, GA 30067

Shenandoah Emer Med Specialists 78 Medical Drive Fishersville, VA 22939 Social Security Administration c/o Timothy J. Heaphy 310 1st Street, S.W. Room 906 Roanoke, VA 24011

Southeaster Program Services Center 1200 Rev. Abraham Woods, Jr. Blvd Birmingham, AL 35285

Southwest Credit Systems 4120 International Parkway Suite 1100 Carrollton, TX 75007

St John's Provadance 14127 North PO BOX 14000 Belfast, ME 04915

Steven Windsor PO Box 52 Greenville, VA 24440

Transworld Sys Inc/51 Attn: Bankruptcy PO Box 15618 Wilmington, DE 15618

United Collection Bureau, Inc 5620 Southwyck Blvd Suite 206 Toledo, OH 43614

University of Virginia Health System PO Box 743977 Atlanta, GA 30374

UVA Physicians Group PO Box 9007 Charlottesville, VA 22906-9007

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Va Department Of Taxation*
Taxing Authority Consulting Services, PC
P O Box 2156
Richmond, VA 23218-0000

Veritas Instrument Renal 12475 44th St N Clearwater, FL 33762

F	ill in this inf	ormation to i	dentify your case	:		box only as direc		
D	ebtor 1	Nicholas First Name	Charles Middle Name	Grady Last Name	_	in Form 122A-1Sup	•	
	ebtor 2 Spouse, if filing)	Brandie	Marie Middle Name	Grady Last Name	_	no presumption of abus	presumption	
						applies will be made un est Calculation (Official		
С	anited States Ba ase number f known)			3. The Means Test does not apply now because of qualified military service but it could apply later.				
<u> </u>					Check if t	his is an amended filing		
Of	fficial Form	122A-1						
CI	hapter 7 S	tatement o	f Your Current	Monthly Income			12/1	
info are mil 122	ormation applice exempted from itary service, c 2A-1Supp) with	es. On the top on a presumption complete and file this form.	f any additional pages n of abuse because yo	neet to this form. Include the s, write your name and case ou do not have primarily contion from Presumption of Alancome	number (if knowr sumer debts or be	n). If you believe that y ecause of qualifying	ou	
1.	What is your	marital and filin	a status? Check one o	only				
••		What is your marital and filing status? Check one only.						
	Not married. Fill out Column A, lines 2-11.							
	Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.							
	Married and your spouse is NOT filing with you. You and your spouse are:							
	Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.							
	Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).							
	bankruptcy of August 31. If in the result.	the amount of your point of the amount of your point include an arms.	§ 101(10A). For exampour monthly income varing income amount more	ed from all sources, derived ole, if you are filing on Septen ed during the 6 months, add to the than once. For example, if I have nothing to report for any	nber 15, the 6-mont the income for all 6 both spouses own t	th period would be Marc months and divide the the he same rental property	h 1 through total by 6. Fill	
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse		
2.	_	vages, salary, tip yroll deductions).	os, bonuses, overtime	, and commissions	\$3,489.78	\$0.00		
3.	Alimony and if Column B is	•	nyments. Do not include	de payments from a spouse	\$0.00	\$0.00		
4.	expenses of regular contrib	you or your dep outions from an u onts, parents, and	roommates. Include re		\$0.00	\$0.00		

	tor 2 Nicholas Charles Grady Brandie Marie Grady			c	ase number (if k	nown)
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse
5.	Net income from operating a busine	ess, profession, o	r farm			
		Debtor 1	Debtor 2			
	Gross receipts (before all deductions)	\$0.00	\$0.00			
	Ordinary and necessary operating – expenses	\$0.00	\$0.00	Conv		
	Net monthly income from a business, profession, or farm	\$0.00	\$0.00	Copy here →	\$0.00	\$0.00
6.	Net income from rental and other re	eal property				
		Debtor 1	Debtor 2			
	Gross receipts (before all deductions)	\$0.00	\$0.00			
	Ordinary and necessary operating – expenses	\$0.00	\$0.00	Сору		
	Net monthly income from rental or other real property	\$0.00	\$0.00	here →	\$0.00	\$0.00
7.	Interest, dividends, and royalties				\$0.00	\$0.00
8.	Unemployment compensation				\$0.00	\$0.00
	Do not enter the amount if you conter benefit under the Social Security Act.					
	For you		\$0.	00		
	For your spouse		\$0.	00		
9.	Pension or retirement income. Do was a benefit under the Social Securi		ount received that		\$0.00	\$0.00
10.	Income from all other sources not I amount. Do not include any benefits or payments received as a victim of a or international or domestic terrorisms separate page and put the total below	received under the a war crime, a crime. If necessary, list of	ct ′,			
	Total amounts from separate pages,	if any.		 		+
11.	Calculate your total current monthl	y income.		- [
	Add lines 2 through 10 for each colur Then add the total for Column A to th		В.		\$3,489.78	+ \$0.00 = \$3,489.78 Total current monthly incom

Page 80 of 80 Document Debtor 1 **Nicholas Charles Grady** Debtor 2 **Brandie Marie Grady** Case number (if known) Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: \$3,489.78 X 12 Multiply by 12 (the number of months in a year). \$41,877.36 12b. The result is your annual income for this part of the form. 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. Virginia 3 Fill in the number of people in your household. \$91,781.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

★ /s/ Nicholas Charles Grady Nicholas Charles Grady, Debtor 1

χ /s/ Brandie Marie Grady

Case 19-50632

Doc 1

Filed 07/22/19

Brandie Marie Grady, Debtor 2

Date 7/19/2019 MM / DD / YYYY Date 7/19/2019 MM / DD / YYYY

Entered 07/22/19 14:53:39

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.